From: WebMaster@fns.usda.gov

Sent: Monday, October 30, 2006 11:36 AM

To: WICHQ-SFPD

Subject: Revisionsto WICFoodPackages-Proposed Rule

NAME: Mark Petersen

EMAIL: mpetersen@scmc.org

CITY: Bend STATE: OR

ORGANIZATION: St. Charles Medical Center - Bend & Redmond

CATEGORY: Other
OtherCategory: Health Care
Date: October 30, 2006
Time: 11:36:20 AM

COMMENTS:

October 24, 2006

Mark Petersen Director Hospitality Services St. Charles Medical Center-Bend & Redmond 2500 NE Neff Road Bend, OR 97701

Patricia Daniels, Director Supplemental Food Programs Division Food and Nutrition Service United States Department of agriculture 3101 Park Center Drive Room 528 Alexandria, Virginia 22303

Dear Ms. Daniels:

REF Docket ID Number 0584-AD77-WIC Food Package Rule

As an Oregon health care executive, greatly invested in the health of Oregon's citizens, I am writing to show my support for the revisions in the WIC food packages proposed by the USDA. The following letter, written by the Community Food Security Coalition in

Venice, California, powerfully demonstrates several reasons how and why these changes are necessary. I am in full support of their suggestions and insights as outlined below:

"In light of the severe health and dietary challenges confronting many Americans, especially lower income families and children, it is heartening to see a proposal that will allocate a greater share of public nutrition assistance resources for the healthiest foods available. The introduction of fruits and vegetables, particularly fresh ones, for the WIC food packages will not only encourage healthy eating for the program's mothers and children now, but will also encourage a lifetime of healthier eating for the future.

Over the last 30 years, farmers' markets have played an increasingly important role in bringing fresh, locally produced fruits and vegetables to the nation's communities. Because they have been particularly successful in making fresh produce available in lower income urban and rural areas, and especially to WIC participants, we focus our comments on the proposed revisions that address the inclusion of farmers' markets as eligible vendors.

According to USDA, there are now 3,740 U.S. farmers' markets (a number that is continuously growing) serving millions of consumers and providing tens of thousands of farmers with strong market outlets for locally produced food. They operate in every state, nearly every major city, and can be found in almost every county. Farmers' markets have been enormously successful in bringing a wide selection of affordable, extremely fresh, and locally grown produce to places that have been traditionally under served by other forms of affordable, retail food outlets. Among other places, the acceptance of farmers' markets by WIC participants is evident in a Los Angeles research study (E. Jenks, et.al., University of California, Los Angeles) that found that WIC participants redeemed 90.7 percent of their special fruit and vegetable coupons at a farmers' market compared to 87.5 percent at a supermarket even though the location and the hours of the supermarket were more convenient.

To be successful in under served, often lower income neighborhoods, farmers' markets have had to learn the specific fresh food preferences of their residents. This has frequently meant that farmers have tailored their crop selection and marketing to the traditional food preferences of a wide variety of racial and ethnic minority groups, and in many cases, newly arrived refugee and immigrants groups. Such efforts have sometimes been aided by programs that provide training and start up needs to new and immigrant farmers who are from the same communities as WIC shoppers. The result is that new farmers are growing and marketing food at farmers' markets that is preferred by these same minority, refugee, and immigrants groups.

All in all, farmers' markets have improved the access of some of America's most nutritionally vulnerable people to fresh, affordable produce. And without good access to healthy food, nutrition education and increased buying power will have little effect.

A complementary aspect of farmers' market growth in low-income communities has been the development and gradual expansion of USDA's WIC Farmers Market Nutrition

Program (FMNP), started in1989 and further extended by the development of the Senior Farmers Market Nutrition Program in 2001. The WIC FMNP now operates in 46 states, U.S. territories, and tribal nations and served approximately 2.7 million WIC recipients in 2005, a number which represents a third of all WIC recipients. Surveys conducted over the years by state and tribal agencies, which administer the WIC FMNP consistently find that the modest benefits provided to WIC recipients (usually about \$20 per recipient annually) result in greater consumption of fresh fruits and vegetables among recipients. When WIC offices and other participating organizations, including the farmers and farmers' markets themselves, provide nutrition education information and activities to WIC recipients, the value of the FMNP vouchers is enhanced and the long-term consumption of fresh fruits and vegetables is more likely to occur. Just as farmers' markets have brought fresh produce to economically distressed communities, the FMNP has brought more socially and economically disadvantaged families to farmers' markets.

The WIC FMNP has two major benefits that will enhance the effectiveness of providing special produce vouchers that can be redeemed at farmers' markets. First, the FMNP coupons in themselves provide a strong boost to the viability of low-income farmers' markets; many such markets might not operate without such a program. Secondly, by operating WIC FMNPs, states and tribal organizations have developed the organizational and administrative capacity they will need to operate the proposed WIC produce voucher program. The current procedures for WIC FMNP benefit distribution, redemption, and accountability are very consistent with the proposed revisions pertaining to fruit and vegetable vouchers. FMNP agencies (generally state health and agriculture departments) now issue vouchers that range in value from \$2 to \$5. They have voucher tracking and other accountability procedures as well as procedures to authorize participating farmers and farmers' markets. Additionally, both the development of farmers' markets and the implementation of the WIC FMNP require working partnerships and collaborations between multiple agencies and organizations, both public as well as private. These experiences and practices, developed over the course of 17 years of operating the WIC FMNP, should allow state and tribal WIC agencies to make a relatively smooth transition to the implementation of the proposed fruit and vegetable voucher system.

In order for WIC recipients to secure as much nutritional value as possible from the use of the proposed fruit and vegetable WIC vouchers at farmers' markets, we offer the following comments and recommendations for inclusion in the WIC Food Package regulations:

- USDA shall do no harm to the WIC Farmers Market Nutrition Program either through reducing current funding levels or establishing rules, systems, or procedures at the federal or state levels that would adversely affect the operation and effectiveness of the WIC FMNP.
- Coordination shall be required between the proposed WIC fruit and vegetable voucher program and all existing and future federal-state WIC Farmers Market Nutrition Programs.
- Farmers and farmers' markets that are currently authorized under state WIC FMNP procedures shall be automatically eligible for vendor specification under the new

fruit and vegetable voucher program. These WIC FMNP farmer and farmers' market authorization procedures shall also be applied by states in the future vendor specification process.

- States shall be required to allow farmers' markets as eligible vendors for fresh fruits and vegetables, with the provision that they comply with farmers' and farmers' market authorization procedures.
- Farmers and farmers' markets that are currently authorized under state WIC FMNP procedures shall be automatically eligible as WIC vendors for the new fruit and vegetable vouchers issued by the WIC program. The WIC FMNP farmer and farmers' market authorization procedures shall also be applied by states as the vendor requirements for farmers or farmers' markets for this program.
- With respect to vendor requirements, farmers' markets shall be allowed to participate as seasonal vendors since most farmers' markets in the country are unable to operate year round. Similarly, farmers' markets shall be exempt from the "WIC-only" cost containment requirement and shall not be required to carry a full-range of WIC food package products.
- When practicable, states should seek to develop systems for the distribution and use of fruit and vegetable vouchers that are compatible with existing WIC FMNP procedures. Nutrition education efforts and state and local promotion of fresh fruit and vegetable vouchers should be compatible with and seek to take advantage of existing WIC FMNP education and promotion practices. States should be encouraged to reduce the administrative costs associated with a fruit and vegetable voucher system by developing systems that are compatible with their respective WIC FMNPs
- In the event that states adopt EBT technology for the use of nutrition benefits by WIC recipients, farmers' markets must also be provided with the most practical EBT systems for the fruit and vegetable redemption process.

With respect to all vendors that may be specified under this program and other key operational issues for the new fruit and vegetable voucher program, the Community Food Security Coalition recommends the following rules:

- State agencies shall not have the authority to limit the range of fruit and vegetable items that may be purchased with fruit and vegetable vouchers, though preference shall be given to fresh fruits and vegetables first, then to frozen, and lastly canned.
- There shall be a cost of living adjustment reflected in the value of the vouchers in order to keep pace with inflation.
- The denomination of fruit and vegetable instruments shall be in small amounts such as \$1.00 and \$2.00 denominations.
- No change shall be given for vouchers that don't purchase their full denominational value.
- Consistent with Institute of Medicine's recommendation, we support the amount of \$10 per month of fruits and vegetables for mothers and \$8 for children.
- State advisory groups shall be established to develop the most effective and responsive system possible for operating the fruit and vegetable voucher program. Where states and/or municipalities have food policy councils, their participation in the advisory process is strongly encouraged.

- Just as farmers' markets have been pioneers in making the best fruits and vegetables available to people and places that need them the most, CFSC recommends that WIC encourage the availability of high quality fresh fruits and vegetables in all outlets that serve WIC recipients. In this regard the national WIC Program should consider implementing pilot projects that test various methods of increasing access to fresh produce in a variety of retail food outlets, including farmers' markets, in areas that are poorly served by such outlets."
- "...I thank you for the forward-looking proposal to make fruits and vegetables a regular part of the WIC food package. This advance in the food package will not only prove immeasurably valuable for lower income women and children, but also assist the nation's family farmers for whom farmers' markets are essential to preserving their livelihoods. Farmers' markets can make a substantial contribution to the success of this new initiative, one that promises to provide a healthy tomorrow for all Americans."

Sincerely,

Mark Petersen

From: WebMaster@fns.usda.gov

Sent: Monday, October 30, 2006 11:00 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Lisa Zullig,MS,RD EMAIL: lzullig@nyc.rr.com

CITY: New York STATE: New York ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: October 30, 2006 Time: 11:00:13 AM

COMMENTS:

Please support the proposal to improve the health and nutritional content of WIC Food Packages.

10-27-06 robbins

HP-569

From: robbinse1@msn.com

Sent: Friday, October 27, 2006 9:45 AM

To: WICHQ-SFPD

Cc: robbinse1@msn.com

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels,

Few would dispute the imperative to care for children, the hungry, and the poor. I am writing in support of proposed chages in the WIC program. WIC makes a crucial difference in the lives of women and children across our country.

I understand that the WIC Food Package Proposed Rule offers the most significant and substantive changes to the food packages since the Program's inception in 1974.

I am writing to thank USDA/FNS for its efforts in bringing the WIC food packages in alignment with the 2005 US Dietary Guidelines and other national nutrition guidance, including those of the American Academy of Pediatrics.

The proposed changes bring the food overings into line with current knowledge about healthy eating. The add fruits and vegetables, whole grain cereals, soy milk, tofu, etc., which provide a greater variety of high nutrient food choices and will allow WIC to better meet the needs of its culturally diverse population.

Currently, WIC serves 8.2 million women, infants and children. Here in Iowa, numbers using this program have risen from 60,664 to 67,823 over the last five years. Approximately half of all infants and 25% of all children under 5 in the U.S. participate in WIC. The revised food packages will help our nation's families to establish healthy eating habits — a key to preventing obesity, diabetes and heart disease.

I am writing to support this proposed change and encourage USDA to move for publication of a final rule by the spring of 2007 to assure timely implementation of the rule's invaluable changes.

Sincerely,

Elisabeth Robbins, PhD 1140 A Avenue Marion, IA 52302

Sent: Saturday, August 12, 2006 2:08 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Mary Lou Last Name: Howard

Mailing Address: 1021 Oak Hills Dr.

City: Colorado Springs Country: United States State or Province: CO Postal Code: 80919

Organization Name: Memorial Hospital

Comment Info: =========

General Comment: I am a RN, Lactation Consultant, IBCLC for the last twelve years in a hospital setting and have worked on the National Breastfeeding Campaign recently. I am always looking for ways to continue to promote long term breastfeeding for the improved health of infants and mothers. As I teach breastfeeding and offer support to WIC mothers, I would like the government to also improve breastfeeding promotion by offering less formula to families. If less formula is offered, the general public would begin to acknowlege that there is consistancy in breastfeeding promotion by health care givers, and the WIC agency that offers aid to mothers and babies. Please consider less formula, with a goal that no formula is given to healthy infants with no medical reason to give formula.

Thank you for starting the change in the food packages to WIC clients.

From: no-reply@erulemaking.net

Sent: Wednesday, August 30, 2006 3:32 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Lark Last Name: Noll

Mailing Address: 103 SW Kendrick Ct

City: Ft. White

Country: United States State or Province: FL Postal Code: 32038 Organization Name: WIC

Comment Info: ===========

General Comment: As a WIC nutritionist I am very excited for this possible change. I have worked with WIC for 23 years and have seen the needs of our clients change. I support the proposed changes.

From: no-reply@erulemaking.net

Sent: Wednesday, September 27, 2006 7:28 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Lauren

Last Name: Kearney, M.D.

Mailing Address: 4059 Carmel View Rd #42

City: San Diego

Country: United States State or Province: CA Postal Code: 92130

Organization Name: North County Health Services

Comment Info: ==========

General Comment: As a pediatrician who served a population where >60% of children are obese. I applaud the proposed changes to the WIC food package, particularly the addition of fresh fruits and vegetables and the elimination of whole milk for kids>2 y/o.

This would be very helpful in assisting parents to follow the new food pyramid guidelines.

From: no-reply@erulemaking.net

Sent: Thursday, September 28, 2006 11:40 AM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Laurelle Last Name: Hiroshige

Mailing Address: 2705 Luciernaga St.

City: Carlsbad

Country: United States State or Province: CA Postal Code: 92009

Organization Name: North County Health Services - Peds Dietitian

Comment Info: ==========

General Comment: I fully support elimiating juice from the infant package and overall, decreasing the fat in the WIC voucher packet. It would be nice if the default for milk were 2% for children over the age of 2. Since I work with the overweight children, I would like to see lower calorie, lower fat options.

Thank you!

Sent: Thursday, October 05, 2006 3:25 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Louise Last Name: Greenspan

Mailing Address: 2200 O'Farrell Street

City: San Francisco Country: United States State or Province: CA Postal Code: 94122

Organization Name: Kaiser Permanente San Francisco

Comment Info: ==========

General Comment: As a pediatrician specializing in the care of children with obesity and Type 2 diabetes, I am very pleased to see these changes. Eliminating juice and providing more fresh fruit and vegetables is an important way to improve the health of our children. Low fat milk after age 2 is also an important change.

Sent: Saturday, October 14, 2006 12:07 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy Document ID:

RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Donald

Last Name: Miller MD MPH

Mailing Address: 408 Cassidy Street

City: Oceanside, CA Country: United States State or Province: Postal Code: 92054

Organization Name: American Academy of Pediatrics

Comment Info: ==========

General Comment: Perhaps no single federal government policy change has the potential to impact childhood obesity and nutrition as this one does. Those families and children who are most impacted by poor diet and chilhood obesity are the same famlies and children who rely on the excellent WIC program to feed their families. These families look to WIC as a source of nutritional education, breasfeeding assistance, and food staples. The preponderance of high fat, dairy, and high-calorie foods avaiable currently on WIC sends a mixed message to families. As pediatricians, we often find that the current WIC "choices" almost contradict what we try to advise young parents and families about nutrition for their toddlers. Fruit juice is a perfect example of this dichotomy. I know how strong the dairy industry will be in their opposition to these changes, even proposing that they be "tested." I would like to think that eating fresh fruits and vegetables, limiting high fat and high sugar foods, and having food "packages" for mothers that encourages breast-feeding (at any level), are universal concepts that need not be taken through the rigors of scientific testing! Make a decision that is best for children '--- and speak for

WIthout you, they have no voice.

Sent: Tuesday, October 31, 2006 11:40 PM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy

Document ID: RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Alivia Last Name: Lucci

Mailing Address: 111 B Shotwell St

City: SF

Country: United States State or Province: CA Postal Code: 94103 Organization Name:

Comment Info: =========

General Comment: I live in SF, CA

I'm strongly against not giving formula in the 1st mo. I know that this will mean that some moms will say they are not breastfeeding at all in order to get formula. I believe that this actually will discourage breastfeeding. Otherwise the changes are fantastic, fresh fruit/veg and culturally appropriate foods!!

Alivia Lucci, MS, RD

From: Donna Beshgetoor [beshgeto@mail.sdsu.edu]

Sent: Thursday, November 02, 2006 2:02 PM

To: WICHQ-SFPD

Subject: "Docket ID Number 0584-AD77, WIC Food Packages Rule"

Dear Madam/Sir,

As PI of the SDSU Foundation WIC program, I see first-hand the many health and nutritional benefits provided by WIC Programs. I fully support the proposed WIC food package changes to better meet the needs of our clinets.

Sincerely,

Donna Beshgetoor

Donna Beshgetoor, PhD Associate Professor San Diego State University 5500 Campanile Drive San Diego, CA 92182-7251 (619) 594-1918 From: Linda Kilby [lkilby@northwic.org]
Sent: Thursday, November 02, 2006 4:59 PM

To: WICHQ-SFPD

Subject: Proposed WIC Food Package Rule

I am writing in favor of the proposed changes in the WIC food package. After 30 years it is wonderful to know that the eating habits of our very diverse population have been taken into consideration in providing a well balanced, variety of foods this very needy population. Including options to milk, cheese and eggs is so important with many children and adults having allergies or intolerance to dairy products. It is also necessary to teach the importance of fruits and vegetables and to offer these instead of juice to increased the fiber is the diets of the many children that are overweight. WIC is the most important public health nutrition program available to the families of preschool children. Please consider these changes as we plan for the future of our children. Thanks you.

Linda M. Kilby, MS, RD, LDN 298 Wabash Avenue, Lansdowne, PA 19050 From: Thomas and Andrea Maher [maher@willinet.net]

Sent: Thursday, November 02, 2006 10:37 PM

To: WICHQ-SFPD

Subject: DocketID#0584-AD77, Wic Food Packages Rule

Please support changes to the WIC food program to promote optimal health in the food items offered to its clients.

I have been a WIC dietitian in the past and often found it odd that we provided vouchers for the purchase of juice but yet educated our clients to limit the intake of juice in our children/infants for a variety of reasons including dental health and obesity/excessive calorie intake.

I support the purchase of fresh/frozen fruits and vegetables in order to obtain a variety of rich nutrients as recommended by the National Institute of Health, the option to purchase soy milk or other soy products instead of milk for allergy and cultural preferences, and availability of other calcium-rich/high protein foods such as yogurt, canned salmon and tofu instead of just cheese and peanut butter.

By introducing a variety of foods to the WIC food package, WIC participants are able to bring healthier foods to their families' table and allow them to become common staple food items in the household. This is how we will educate our future on nutrition... let us lead by example.

Many thanks, Andrea Maher, RD, LD Bettendorf, IA 52722 563/332-7393

From: Nancy Meister [nancy.meister@azwestern.edu]

Sent: Thursday, November 02, 2006 1:34 PM

To: WICHQ-SFPD

Subject: WIC Food Package

I recommend that USDA adopt policies that better promote and support breastfeeding, provide a wider variety of food including fresh fruits and vegetables, and provide state agencies the authority to tailor food packages to better meet the needs of the clients.

Nancy L. Meister, MPH, RD Professor/Coordinator Culinary/Dietary/HRM Arizona Western College From: Elizabeth Metallinos-Katsaras

[elizabeth.metallinoskatsaras@simmons.edu]
Sent: Thursday, November 02, 2006 1:10 PM

To: WICHQ-WEB

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule,"

Dear Ms. Daniels,

I am writing in strong support for the implementation of the Institute of Medicines recommendations to change the WIC food package. We must bring the WIC food packages in line with science and current dietary recommendations if we are ever to forestall the acceleration of childhood and adult overweight and promote healthful dietary behaviors in our most important asset: our nation's children. I am a professor of nutrition and know the vast impact that diet has on health; in low income children WIC is one of the best nutrition interventions we can have. Let's make the most of it and not allow the special interests to undermine the health of our children.

Sincerely,
Dr. Liz Metallinos-Katsaras
Assistant Professor,
Nutrition Department,
School for Health Studies,
Simmons College,
Boston MA 02115.

From: Kristin Ritzenthaler [kritz@idahodairycouncil.org]

Sent: Thursday, November 02, 2006 4:53 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

To whom it may concern:

My name is Dr. Kristin Ritzenthaler. I work as a Nutrition Educator in the State of Idaho. I support the proposed improvement of fruits and vegetables in the WIC food package. However, I am concerned about the proposed changes to the dairy food package. Milk and other dairy products offer a unique nutrient package that supplies priority nutrients identified by the Institute of Medicine (IOM). Moreover, the 2005 Dietary Guidelines for Americans (DGA) recommend that most people increase consumption of low-fat and non-fat dairy. Furthermore, the milk group supplies several of the DGA's "nutrients of concern," which are low in most Americans' diets. Making lactose-free milk, rather than soy products, the preferred substitutes for regular milk for those who are lactose intolerant would be consistent with the DGA and other established dietary advice.

Yogurt is an excellent source of calcium, protein, potassium and provides additional benefits due to its health promoting probiotic bacteria. Furthermore, yogurt is an appealing, nutritious food enjoyed by women and children. As recommended by the IOM, permitting women to partially substitute yogurt for milk would provide access to a nutrient-rich dairy food that is well-tolerated by those who are sensitive to lactose and fits into a variety of food patterns. The IOM cited both cultural patterns and ease of digestion for people with lactose maldigestion as reasons for adding yogurt.

In addition to yogurt, cheese is another food with an outstanding nutrient profile. Allowing more cheese substitution would give participants more flexibility in food choices, provide more access to an excellent source of calcium and a good source of high-quality protein, and respond to cultural and dietary needs. Cheese is often well-tolerated by people who have trouble digesting lactose.

Allowing all women, including non-breastfeeding women, to receive 3 servings of milk, cheese or yogurt would enhance WIC participants' nutrition.

Thank you for considering my request.

Sincerely,

Kristin

Kristin Ritzenthaler, PhD

Nutrition & Health Executive Director

Idaho Dairy Council

Boise, Idaho

kritz@idahodairycouncil.org

From: gokelly@nwi.net

Sent: Thursday, November 02, 2006 11:05 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

As a concerned citizen, I strongly support the U.S. Department of Agriculture's (USDA) efforts to improve the nutritional quality of the WIC food packages. As USDA finalizes the regulations, please consider the following suggestions to further strengthen the final rule.

Most importantly, I encourage USDA to provide the full fruit and vegetable benefit as recommended by the Institute of Medicine. I support the promotion of whole grains in the revised food packages, limiting sugars in WIC cereals, and discontinuing the fruit juice vouchers.

In addition, bringing the quantity of milk in the WIC food packages in line with the Dietary Guidelines is an important part of the proposed rule. And, I support the proposed rule regarding allowing soy "milk" and calcium-set tofu as substitutes for milk--without requiring a doctor's prescription. I do not support the use of only lowfat milk as I do not think this is a problem for growing children.

I do not support the proposed reductions in the quantities of cheese and eggs in the food packages to decrease saturated fat and cholesterol intake because, again, the problem is not the fat intake but the total amount of saturated fat in the diet of which the recommended servings of milk and cheese do not supply an excess. The junk food and high fat (bad fats) food in the schools is a disgrace and needs some major overhaul.

Overall, I support some of USDA's proposed rule for updating the WIC food packages, and urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Virginia O'Kelly RD,CDE 1105 Fuller St Wenatchee, Washington 98801

From: O'Connor, Helen M. [oconnor.helen@mayo.edu]

Sent: Thursday, November 02, 2006 3:22 PM

To: WICHQ-SFPD

Subject: WIC Food Packages Rule, Docket ID Number 0584-AD77

Patricia N. Daniels
Director
Supplemental Food Programs Division
Food and Nutrition Service, U.S. Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Dear Ms. Daniels:

As a registered dietitian working in cardiovascular, obesity and oncology research, I strongly support the WIC Food Packages Proposed Rule and the U.S. Department of Agriculture's (USDA) efforts to better align the food packages with the Dietary Guidelines for Americans. As USDA finalizes the regulations, please consider the following suggestions to further strengthen the final rule.

Encourage USDA to provide the full fruit and vegetable benefit recommended by the Institute of Medicine. I recommend that the final rule require that the fruit and vegetable benefit regularly receive cost of living adjustments (COLA).

Limit sodium in canned or frozen vegetables to no more than 480 mg per serving (the disqualifying level for the Food and Drug Administration's [FDA] "healthy" claim).

Eliminate fruit juice for infants and decreases in the quantity of juice for children and women in the food packages.

Promote the use of whole grains in the revised food packages and retain the proposed limit on sugars in WIC cereals.

Require that all milk in the food packages for children ages 2 to 4 years and women be low-fat (1%) or fat-free (skim), to reflect the recommendations in the Dietary Guidelines and to help to reduce saturated fat intake and the risk of heart disease. I support the proposed rule regarding allowing soy-based beverages and calcium-set tofu as substitutes for milk in Food Package IV, V, VI, and VII.

Require that all cheese offered in the food packages to be light, reduced, or low in fat to be consistent with the recommendation in the Dietary Guidelines to select milk products that are low fat or fat free.

Overall, I strongly support USDA's proposed rule for updating the WIC food packages. I urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Helen O'Connor MS RD Helen M. O'Connor, MS, RD, CCRP Research Dietitian General Clinical Research Center Mayo Clinic College of Medicine St Marys Hospital 1216 2nd Street SW Rochester, MN 55902

Name Occupation/organization Address From: WebMaster@fns.usda.gov

Sent: Thursday, November 02, 2006 11:18 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Gretchen E. Robinson MS RD LD FADA

EMAIL: robinson@wcoil.com

CITY: ADA STATE: Ohio

ORGANIZATION: Ohio Dietetic Association

CATEGORY: Other

OtherCategory: Consultant Dietitian (non-WIC)

Date: November 02, 2006

Time: 11:18:00 AM

COMMENTS:

I am excited about the WIC proposed rule package to increase fruits and vegetables to their intended clients...a giant step in the right direction! But, I am concerned that USDA did not implement an IOM recommendation to allow women to receive up to 4 quarts of yogurt each month (6 quarts for breastfeeding women) as a quart for quart substitution for milk. Also, USDA is not clear about how reduced lactose milk, for those who cannot drink milk due to lactose intolerance, fits into the proposed rule.

On the basis of nutritional and cultural considerations, suggested modifications to USDA's proposals could help increase WIC participants'access to nutrients in dairy.

1. make lactose-free milk, rather than soy products, the preferred substitue for regular milk for those who are lactose intolerant making the proposed change consistent with the DGA and other established dietary advice; as rocommended by the IOM; 2. permitting women to partially substitute yogurt for milk providing access to a nutrient-rich dairy food that is well-tolerated by those who are sensitive to lactose and fits into a variety of food patterns; and 3. allowing all women including non-breastfeeding women to receive 3 servings of milk each day enhanceing WIC participants' nutrition. These proposed modifications to USDA's WIC package can have far reaching implications to improving the intake of important nutrients from Dairy products. Clearly, it is critical to provide the best nutrition at all stages of life but none more important than at the early stages of life. I thank you for the opportunity to comment.

From: sojournr@ix.netcom.com

Sent: Thursday, November 02, 2006 2:34 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

I strongly support the U.S. Department of Agriculture's (USDA) efforts to improve the nutritional quality of the WIC food packages. Please consider the following suggestions to further strengthen the final rule.

As a health care professional, I encourage USDA to provide the full fruit and vegetable benefit as recommended by the Institute of Medicine. I support the promotion of whole grains in the revised food packages, and DEFINITELY limiting sugars in WIC cereals.

The USDA should require that all milk in the food packages for children ages 2 to 4 years and women be fat-free (skim) to help to reduce saturated fat intake. Soy "milk" and calcium-set tofu are good substitutes for milk--without requiring a doctor's prescription.

To decrease saturated fat and cholesterol intake, I urge USDA to require all cheese offered in the food packages to be light, reduced, or low in fat.

Overall, I strongly support USDA's proposed rule for updating the WIC food packages, and urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Jacquelyn Schechter 33 Nichols Hill Drive Asheville, North Carolina 28804-9712 Docket ID#0584-AD77, WIC Food Packages RuleFrom: Minerva Vazquez

[mvazquez@communityactioninc.org]

Sent: Thursday, November 02, 2006 11:27 AM

To: WICHQ-SFPD

Subject: Docket ID#0584-AD77, WIC Food Packages Rule

I'm sending this e-mail to let you know that I support the proposal to change the WIC foods. Go with fruits and vegetables, whole grain products (corn tortillas mmmm! Delicious! I am from Mexico), low fat milk, soy milk and please less formula. Please discard special formulas, participants can get it through their insurance if they really need it.

Excellent proposal for BF infants!

Minerva Vazquez Senior Nutritionist Northern Essex WIC Program From: WebMaster@fns.usda.gov

Sent: Thursday, November 02, 2006 10:52 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: frances willis

EMAIL: frances_willis@via-christi.org

CITY: wichita STATE: Kansas

ORGANIZATION: Via-Christi-St Francis Hospital IndividualHlthProfessional

CATEGORY:

OtherCategory:

Date: November 02, 2006

Time: 10:51:33 AM

COMMENTS:

I have a personal as well as professional interest in several aspects of the proposed rule. I am lactose intolerant and depend heavily on soy milk, yoghurt and cheese to get the calcium I need so I especially identify with those who need WIC assistance being limited in the availability of those products.

As to 4 servings milk products a day, I advocate retaining that for pregnant/breastfeeding participants.

From: Valerie Winstrom [vwinstrom@shsmail.sdsu.edu]

Sent: Thursday, November 02, 2006 7:33 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

I am a Health Educator at San Diego State University, writing to provide my personal support of the proposed rules that would implement changes to the current WIC food packages. The packages have not been updated since the initiation of WIC over 30 years ago. As reflected in the recommendations by the Institute of Medicine, the changes to make sure that WIC foods are consistent with the 2005 Dietary Guidelines and the infant feeding practice guidelines of the American Academy of Pediatrics, are largely overdue and extremely necessary.

As an undergraduate & graduate student at San Diego State University, I studied nutrition and public health, and had the opportunity to spend a semester volunteering in a WIC clinic. The classes taught at WIC encourage increased consumption of fruits and vegetables and decreased consumption of saturated fats. These are only two of the major improvements that will be made to the diets of WIC clients when the proposed rules of change are implemented.

I strongly urge and ask, that the rule is published by the Spring of 2007 in order to ensure it survives to full effect.

Please understand the immense potential that the new WIC food packages will provide in terms of improving the nutritional status of women and children in the US. The benefits of the changes made today, will be reaped by all generations in the future.

As a Public Health professional, I support the proposed changes in the WIC food package.

Thank you,

Valerie Winstrom

Valerie Winstrom Health Educator San Diego State University Student Health Services/Aztec Recreation Center San Diego, CA 92182-4701

Phone: (619) 594-1800 Fax: (619) 594-2255 From: worobey@rci.rutgers.edu

Sent: Thursday, November 02, 2006 5:22 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

As a nutrition professional and child advocate, I strongly support the USDA's efforts to improve the nutritional quality of WIC food packages. In finalizing the regulations, please consider the following suggestions:

Please provide the full fruit and vegetable benefit as recommended by the Institute of Medicine, promoting whole grains in the revised food packages, and limiting sugars in WIC cereals.

Please require that all milk in the food packages for children ages 2 to 4 years and women be low-fat (1%) or fat-free to help to reduce saturated fat intake and harm to children's hearts and arteries.

Please reduce the quantities of cheese and eggs in the food packages to decrease saturated fat and cholesterol intake, and urge USDA to require all cheese offered in the food packages to be light, reduced, or low in fat.

Overall, I strongly support USDA's proposed rule for updating the WIC food packages, and urge USDA to publish the final rule by Spring 2007 to bring these improvements to WIC participants as soon as possible.

Sincerely,

John Worobey 26 Nichol Avenue New Brunswick, New Jersey 08901 From: Vanessa Miles [VMiles@drink-milk.com] Sent: Friday, November 03, 2006 11:27 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

The USDA's proposed changes to add fruits and vegetables to the WIC package is a step in the right direction! However, the current proposed changes will reduce WIC participants' access to dairy products and likely reduce overall consumption of dairy and the nutrients found in dairy foods.

On the basis of nutritional and cultural considerations, modifications to USDA's proposals could help increase WIC participants' access to nutrients in dairy:

- a.. Making lactose-free milk, rather than soy products, the preferred substitutes for regular milk for those who are lactose intolerant would be consistent with the DGA and other established dietary advice.
- b.. As recommended by the IOM, permitting women to partially substitute yogurt for milk would provide access to a nutrient-rich dairy food that is well-tolerated by those who are sensitive to lactose and fits into a variety of food patterns.
- c.. Allowing all women, including non-breastfeeding women, to receive 3 servings of milk each day would enhance WIC participants' nutrition.

I appreciate your attention on this important issue which has far-reaching implications. Please contact me if you have any further questions.

Vanessa R. Miles, MS, RD, LD

President - Elect, West Virginia Dietetic Association

Registered Dietitian

American Dairy Association &

Dairy Council Mid East

101 TWP Rd. 1385

Proctorville, OH 45669

phone 740/886-0950

fax 614/890-1636

www.drink-milk.com

Sent: Friday, November 03, 2006 1:48 AM

To: CNDPROPOSAL

Subject: Public Submission

Please Do Not Reply This Email.

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:=======

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy Document ID:

RIN: 0584-AD77

Publish Date: 08/07/2006 00:00:00

Submitter Info:

First Name: Danielle Last Name: Anthony

Mailing Address: 28149 Alton

City: Castaic

Country: United States State or Province: CA Postal Code: 91384

Organization Name: tRegister Nurse; Lactation Educator

Comment Info: ==========

General Comment: Excellent packaging rule!

From: Kelly S. Buono [buono@email.unc.edu] Sent: Friday, November 03, 2006 4:01 PM

To: WICHQ-SFPD

I support the improvements in the package. I would ike to see les juice and more fruits and vegetables however. I was a WIC nutritionist and had people asking for less juice, more milk, soy milk, and fruits and vegetables daily.

Kelly Buono, MPH RD

From: Erin Paris [eparis@siumed.edu] Sent: Friday, November 03, 2006 3:35 PM

To: WICHQ-SFPD

Subject: wic changes

I would like to make some comments on the current package.

I know that WIC is supplemental and that the main population targets are young kids, pregnant and nursing mothers. I would like to see at least 60 g of protein provided per day (in the form of whole grains, cereals, beans, cheese, milk, peanut butter (natural!), nuts, eggs, and meats) for each mother. 60 grams is the minimum intake recommended for a mother.

Why is natural peanut butter not allowed? Lots of times it is actually cheaper than the trans fat/whipped PB's.

Why not dry beans? They are more cost effective!

Why not chili beans? Chili with meat and/or beans?

Why not lentils?

Why not canned beans?

Also, reduce the juice amount given to just 4 ounces per day per adult and child since that is all that is required to acheive 100% of vitamin C intake. This extra food allotment could be used towards fresh fruits and vegetables, even frozen options.

I work with many WIC clients and see the struggles they have with the WIC food packages. They think that since they are given so much juice, that they need to drink it. This is a double negative with the overweight and diabetic clients. And last point, Could higher fiber foods be encouraged? Constipation is a problem with kids and pregnant mothers; why not help at the source. Thank you for listening,

Erin RD

From: WebMaster@fns.usda.gov

Sent: Friday, November 03, 2006 12:01 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Nicole Flateboe EMAIL: nflateboe@gmail.com

CITY: Seattle STATE: WA

ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 03, 2006

Time: 12:01:17 PM

COMMENTS:

I am writing to express my support for the proposed rule to change the WIC food packages. The health and well-being of the nation's women, infants and children is a priority for me in my work and personal life. The proposed changes will greatly benefit vulnerable mothers and children.

I am pleased that the proposed rule closely reflects the science-based recommendations of the Institute of Medicine published in their April 2005 report entitled, WIC Food Packages: Time for a Change. These changes reflected in the proposed rule are also consistent with the 2005 Dietary Guidelines for Americans and national nutrition guidance including those from the American Academy of Pediatrics.

However, I am disappointed to see that juice will continue to be offered on the WIC food package. Juice is not as nutrient dense as fruits and vegetables. Therefore, I propose a increase in the cash value for fruits and vegetables and elimination of juice. It is most responsible to be using tax dollars for the most nutrient-dense foods for this at-risk population.

Overall, the proposed food packages will provide greater amounts of all the priority nutrients currently identified as needed by the WIC population. They will supply a reliable and culturally acceptable source of supplemental nutritious foods as well as promote and support exclusively breastfeeding women. Equally important, the proposals will provide WIC professionals with the necessary tools to reinforce the nutrition education messages and promote healthier food choices.

Sincerely, Nicole Flateboe MPH, RD, CD From: Frank, Deborah A [dafrank@bu.edu] Sent: Friday, November 03, 2006 11:02 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia N. Daniels, Director

Supplemental Food Programs, FNS/USDA

3101 Park Center Drive, Room 528

Alexandria, VA 22302

RE: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels:

As a professor of pediatrics and expert in Failure to Thrive, I am writing to support USDA's proposed WIC Food Packages Rule, which will:

- \cdot $\;$ improve the health and nutritional quality of the foods in the program;
- expand cultural food options; and
- · increase participants' choices.

We commend USDA for updating the WIC food packages to reflect the Dietary Guidelines and current nutritional science by adding fruits and vegetables, whole grain bread, corn tortillas, whole grain rice and other whole grains, the option of soymilk and tofu, and moving to only low-fat milk and whole grain cereals, ALTHOUGH I THINK WHOLE MILK MAY BE NEEDED ON A PHYSICIAN'S ORDER FOR MALNOURISHED CHILDREN.

Since the food packages were last revised, there has been an explosion of knowledge related to nutrition and health, as well as a growing obesity problem in this country. HOWEVER, MALNUTRITION AMONG INFANTS AND TODDLERS HAS NOT VANISHED AS OBESITY INCREASED - INDEED 1 IN 10 OF CHILDREN UNDER THREE AT THE BOSTON MEDICAL CENTER IS UNDERWEIGHT FOR AGE OR LENGTH. THUS FAILURE TO THRIVE MUST ABSOLUTELY BE RETAINED AS A MEDICAL RISK CRITERION FOR WIC AND THE OPTION OF ADJUSTING FOOD PACKAGES TO HIGHER CALORIC DENSITY ITEMS FOR THIS CONDITON RETAINED. The addition of fruits and vegetables, whole grain products, and other improvements in the new WIC food packages, will strengthen WIC's positive role to help mothers and children maintain a healthy weight and allow them to make healthy food choices. This will help nutritionally vulnerable children form healthy eating habits from an early age.

Moreover, we applaud USDA's proposed improvements for infants, breastfeeding women, and medically fragile participants. The introduction of fruits and vegetables as baby food for older infants will provide healthy foods the family might not otherwise be able to afford. The new enhanced food package for breastfeeding women should help WIC to promote breastfeeding. The new rule also will provide welcome relief for families struggling to pay for essential nutrition products for women and children with special nutritional needs.

To ensure that WIC participants can get the full value from the new WIC food packages, we offer the following recommendations to strengthen the proposed rule:

- Expand and Enhance the Fruit and Vegetable Benefit
- · Eliminate Inappropriate Standards and Size Requirements for

Whole Grain Bread and Cereals

- Remove Prescription Requirement for Soy Milk and Tofu
- Keep Proposed Food Package Protections
- · Maximize Access to Farmers' Markets
- Establish State WIC Food Package Advisory Councils

Expand and Enhance the Fruit and Vegetable Benefit:

- * Increase the Fruit and Vegetable Benefits to Fully Meet the Institute of Medicine Recommendations: USDA should make the value of the WIC fruit and vegetable benefit consistent with the IOM's recommendation to provide \$10 per month of fruits and vegetables for women and \$8 for children. The proposal gives children only three quarters of the amount of fruit and vegetables the Institute of Medicine (IOM) determined was necessary for a nutritionally sound children's WIC food package. Children receive \$8 in fruits and vegetables in the food package recommended by the IOM, but the USDA package provides only \$6. For women the proposed rule provides only \$8 in fruits and vegetables rather than the \$10 recommended by the IOM.
- * Allow WIC Participants to Choose the Fruits and Vegetables They Want and Can Use: WIC participants should be allowed to use the WIC food vouchers to select the fruits and vegetables that provide the best nutritional value, best bargain and best choice for themselves and their children. The rule should not give State agencies the authority to set state limits on the variety of fruits and vegetables participants are allowed to purchase with WIC vouchers. The successful WIC fruit and vegetable pilots allowed WIC participants full choice.

* The Value of the Fruit and Vegetable Benefit Must Keep Pace with Inflation: The rule must require that the value of the fruit and vegetable benefit reflect a cost of living adjustment. It is unfortunate that the cost of living adjustment in the proposed rule is optional. Without an annual cost of living adjustment, the vouchers would be worth less and would buy smaller amounts of fruit and vegetables each year as inflation increases - further falling behind the IOM recommendations.

Eliminate Inappropriate Standards and Size Requirements for Whole Grain Bread and Cereals:

- Adopt Appropriate Standards for Whole Grain Cereals to Assure Access to Healthy and Culturally Acceptable Choices: We applaud USDA for preserving the nutritionally important sugar limit and important iron requirements for WIC cereals. However, the new proposed cereal grain standards create a significant barrier for WIC participants to consuming whole grain cereals. The proposed whole grain cereal standard is not an appropriate whole grain standard for bran, corn and rice cereals and consequently it eliminates de facto all bran, corn and rice WIC cereals. This is especially problematic for WIC because Latino families prefer corn-based cereals (for example corn flakes). The inclusion of whole grain corn-based cereals will be necessary to maintain acceptable cereal choices for the 2.5 million Latino women and children in WIC. Also, both corn and rice cereals provide a healthy option for WIC participants with allergies OR GLUTEN SENSITIVE ENTEROPATHY WHICH OCCURS IN 1/1000 CHILDREN IN ALL ETHNIC GROUPS. and bran cereals are an excellent source of much-needed fiber for participants. Therefore, to ensure a selection of healthy whole grain WIC cereals, we recommend the use of revised standards based on the whole grain standards used in USDA's Healthier U.S. Schools guidelines plus two additional alternative criteria of 1) at least 3 grams fiber for bran cereals and 2) a minimum of 8 grams whole grains.
- * The Allowable Size for a Loaf of Bread Must be Consistent with the Bread Available in Stores: WIC participants need a whole grain bread voucher for a loaf of bread that is consistent with the size typically sold in stores. Otherwise, the purpose of the whole grain change is subverted and the value of the food package shrinks further. In many markets, a mother may not be able to buy any whole grain bread with a 1 pound bread voucher. The proposed rule lumps the size of a loaf of bread and grains together as 1 pound (16 ounces). This is fine for the grains (i.e. rice), which are sold by the pound, but bread is sold by the loaf. Whole grain loaves are heavy, usually weighing more than 1 pound. According to data from Interstate Bakeries, 56 percent of whole wheat/whole grain loaves are sold in a 24 ounce loaf and 25 percent are sold in a 20 ounce loaf.

Remove the Prescription Requirement for Soy Milk and Tofu: We commend USDA for including the option of soy milk and tofu to provide popular high-calcium foods for WIC participants from a diversity of cultures. In addition, these foods are an important alternative for participants with milk allergies and lactose intolerance, a problem disproportionately affecting Latinos, African-Americans and Asian-Americans. The new packages will work well for women because they have free access to choosing soy milk/tofu. However, the proposed requirement

for a medical prescription for children to get soy milk or tofu should be removed because it presents an insurmountable barrier for most low-income WIC families.

Keep Proposed Food Package Protections: We commend USDA for building in protections that safeguard the nutritional value of the new food packages for all participants by prohibiting state level cuts to the new food packages. In this proposed rule, USDA prohibits State WIC agencies from making across-the-board cuts in the food packages (a process known as "categorical tailoring"). This will guard against state pressures to dismantle the new WIC food packages. We agree with USDA that, given the carefully balanced food packages as designed by the Institute of Medicine, categorical tailoring is no longer necessary and would be detrimental. Individual WIC participants can have their WIC food package tailored for nutrition reasons or preference through the commonly used mechanism of "individual tailoring."

Maximize Access to Farmers' Markets: USDA's inclusion of farmers' markets as vendors for the new WIC food package fruit and vegetable vouchers is commendable, and, along with the continuation of the WIC Farmers' Market Nutrition Program, will be helpful for WIC families. The rule should make clear that farmers' markets qualify as eligible WIC vendors provided that they comply with the already well-established farmers' market or WIC Farmers' Market Nutrition Program procedures. WIC vendor requirements will need to allow farmers' markets to participate as seasonal vendors and exempt them from stocking the full package.

Establish State WIC Food Package Advisory Councils to Bring a Diversity of Voices and Support to the Implementation Process: State WIC Food Package advisory councils should be established to help support and inform the planning and early implementation of the new WIC food package. To be most effective, the advisory councils should include WIC participants and representatives of the communities and organizations working to improve the health and well-being of the families served by WIC, such as advocates, food bankers and other emergency food providers, immigrant groups, food policy councils, state chapters of nutrition and health associations, and local WIC agencies.

In summary, we strongly endorse the need for the new WIC food packages and urge USDA to proceed expeditiously to analyze the comments, make the necessary changes, and quickly move forward with the process of bringing a new, healthier food package to the more than 8 million women, infants and children in the WIC program each month. Thank you for this opportunity to share our support for the new WIC food packages and our recommendations to make it stronger still.

Sincerely,

Deborah A. Frank MD

Boston University School of Medicine

Director Grow Clinic for Children

Boston Medical Center

725 Massachusetts Avenue Mezzanine SW

Boston Mass.02118

617-414-5252

dafrank@bu.edu

Docket ID # 0584-AD77, WIC Food Pkgs RuleFrom: Holt, Bonnie E (LHD-Barren River

District) [BonnieE.Holt@ky.gov]

Sent: Friday, November 03, 2006 11:13 AM

To: WICHQ-SFPD

Subject: Docket ID # 0584-AD77, WIC Food Pkgs Rule

To Whom It May Concern,

I strongly and enthusiastically supports the USDA issued proposed rule governing the WIC Food Packages published in the Federal Register on August 7, 2006.

The intent of the revised regulations is to improve the nutritional health of all WIC participants. The revisions are grounded in sound science, aligned with the 2005 Dietary Guidelines for Americans, support the current infant feeding practice guidelines of the American Academy of Pediatrics and support the establishment of successful long-term breastfeeding. The proposed food packages provide WIC participants with a wider variety of food choices, allow state agencies greater flexibility in offering food packages that accommodate participants' cultural food preferences and address the nutritional needs of our nation's most vulnerable women, infants and children.

The proposed rule reflects recommendations made by the Institute of Medicine (IOM) of the National Academies in its report, "WIC Food Packages: Time for a Change." It follows the advice of the Institute, which stated that the WIC Program needs to respond to changes in nutrition science, demographics, technology, and the emerging health concerns in the WIC community. The changes in the proposed rule are consistent with nutrition education promoting healthier lifestyles and food selections to reduce the risk for chronic diseases and to improve the overall health of WIC's diverse population. The Department's aim is to add new foods while preserving cost neutrality. To cover the cost of the new foods, WIC will pay for less juice, eggs and milk that have been staples of this extremely successful public health nutrition program, which helps feed more than half the infants born in the United States. While there is some disappointment over the Department's decision to pay for fewer fruits and vegetables than recommended by the IOM, we believe that WIC clients will be pleased that there will be more choices in the foods offered.

The proposed rule aims to support breastfeeding for the first six months and continued breastfeeding, with appropriate complementary foods, until the infant's first birthday. We do not support the recommendation to pilot test the food package for the partially breastfeeding woman. With a delay in implementation of this package, we believe that many women will simply choose to formula feed. We recommend that the fully breastfeeding, partially breastfeeding and fully formula feeding woman's food package changes be implemented concurrently.

We would also suggest that States be given the option to provide the breastfeeding infant, in the first month, with 1). no formula, or 2). one can of powdered formula as recommended in the IOM Report. States would incorporate their option into their existing breastfeeding policies and procedures.

The proposed rule provides for complementary infant food fruits and vegetables at six (6) months of age in varying amounts for those infants who are fully breastfeeding, partially breastfeeding or fully formula feeding as well as infant food meats for fully breastfeeding infants. Children and women

participants will also benefit from the addition of fruits and vegetables through "cash-value" vouchers to purchase fresh and processed fruits and vegetables in the proposed amounts of \$8 for women and \$6 for children. We urge that the dollar amount provided to the fully breastfeeding woman be increased to \$10 to match the IOM recommendation. This would provide further incentive and support for breastfeeding.

The food package recommendations support scientific research findings, which suggest that increasing fruits and vegetables is associated with reduced risk for obesity and chronic diseases such as cancer, stroke, cardiovascular disease, and type 2 diabetes. Fruits and vegetables added to the diet also promote adequate intake of priority nutrients such as Vitamins A, C, folate, potassium and fiber.

I strongly recommend that the dollar denomination of the fruit and vegetable cash-value vouchers and the minimum vendor stocking requirements for fruits and vegetables be determined at the discretion of the WIC State agencies.

The proposed food packages offer calcium-set tofu as well as calcium- and vitamin D-rich soy beverages as partial substitutions and alternatives for milk. These alternatives will prove to be particularly beneficial to those WIC participants who suffer the medical consequences of milk protein allergy, lactose maldigestion, and those with cultural preferences. Currently, there are no calcium-fortified soy-based beverages on the market that meet the proposed protein and potassium standards. Accordingly, we urge levels of 6.25 grams of protein and 250 milligrams of potassium per 8 ounce serving as alternative minimum standards in order for WIC women and children to be able to include soy. We also urge that children be able to receive soy products without the requirement of medical documentation.

The proposed rule to include whole grain bread and other grains for all children and pregnant and breastfeeding women is consistent with the 2005 Dietary Guidelines for Americans which recommend that refined grains be replaced with whole grains. In order to accommodate the medical needs of certain participants, we support the IOM recommendation to allow States to make substitutions for "wheat-free" cereals based on a medical prescription and urge the Department to include such a provision in the final rule.

As a public health worker I see the families daily and know what they are consuming. Too much juice and junk food are given at too early an age. Parents feel like they cannot afford "healthy" foods. The WIC food instruments that they receive is the core of the food in many peoples homes. WIC is our nation's premier public health nutrition program. The long-term benefits of providing participants with fruits and vegetables, lower fat dairy products and whole grains, as well as additional incentives for fully breastfeeding women will greatly aid WIC in improving the life-long health of our most vulnerable women, infants and children.

I look forward to working closing with USDA to fully implement the proposed rule and urge finalization of the rule by no later than the spring of 2007.

Sincerely,

Bonnie Holt, RD, LD, CLC Clinical Nutritionist WIC Breastfeeding Promotion Coordinator

"Those who think they have no time for healthy eating will eventually have to make time for illness." modified from Edward Stanley 1826-1893 The Conduct of Life

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From: tim_lacey@mhsnr.org

Sent: Friday, November 03, 2006 7:10 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

As a concerned citizen and dietitian, I strongly support the U.S. Department of Agriculture's (USDA) efforts to improve the nutritional quality of the WIC food packages. As USDA finalizes the regulations, please consider the following suggestions to further strengthen the final rule.

Most importantly, I encourage USDA to provide the full fruit and vegetable benefit as recommended by the Institute of Medicine.

More so, I would recommend limiting juice provisions given current pediatric recommendations for no more than 6 ounces of juice daily. I support the promotion of whole grains in the revised food packages, and limiting sugars in WIC cereals.

In addition, bringing the quantity of milk in the WIC food packages in line with the Dietary Guidelines is an important part of the proposed rule. However, I recommend that USDA require that all milk in the food packages for children ages 2 to 4 years and women be low-fat (1%) or fat-free (skim) to help to reduce the excess of calories, saturated fat intake and harm to children's hearts and arteries. And, I support the proposed rule regarding allowing soy "milk" and calcium-set tofu as substitutes for milk--without requiring a doctor's prescription.

If by chance a child would require the extra calories provided by whole milk, I feel a prescription stating such would be appropriate (for conditions such as failure to thrive or poor weight gain).

Overall, I strongly support USDA's proposed rule for updating the WIC food packages, and urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Timothy Lacey, RD, LD 485 West Market Street Tiffin, Ohio 44883 From: WebMaster@fns.usda.gov

Sent: Friday, November 03, 2006 8:05 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Betty Lucas

EMAIL: blucas@u.washington.edu

CITY: Seattle STATE: WA

ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 03, 2006

Time: 08:05:13 PM -

COMMENTS:

I support these changes to the WIC program. However I have a couple of comments:

- 1. It appears that the addition of infant fruits, vegetables and meat for those 6-11 months, are all "infant foods", which I assume are commercial infant products. Even if this allows "junior", "stage 2 and 3" etc, these products are all smooth-textures, pureed, and require someone to feed these foods to the infants. By 7-9 months of age, typically-developing infants should be offered solids that provide some texture and lumps. They are also ready to begin fingerfoods, and in addition to cereal products, this can include pieces of well-cooked fruit and vegetable. Allowing only the smooth-textured commercial products does not support this developmental change in advancing textures and beginning self-feeding. Please consider a transition to fresh, frozen or canned fruits and vegetables before 1 year of age.
- 2. The addition of meat at 6 months of age for the exclusively breast-fed infant is important to provide an iron source. However, I don't know how realistic it is to begin providing a small jar of baby meat daily at 6 months. If we are encouraging the addition of solids at 6 months, the initial foods for acceptability should start with single-grain cereal, fruits and vegetable (and the iron-fortified cereal will help in addressing the iron needs). It seems unlikely that parents would initially offer meat as a solid food. Additionally, there is the issue of palatability (due to meat texture), and usually acceptance is improved when the meat is combined with vegetables at first. I think you should reduce and/or delay the amount of meat in this 6-11 month package. You should consider the reality of how much meat parents will feed infants and make sure this is not a waste of resources for the families and the WIC program. In addition, the addition of meat as a recommendation for exclusively breast-fed infants should be addressed by nutrition education to improve acceptance and incorporation into the infants' diets.

HP-656

BreastfeedingFrom: Oba, Sayuri - GMHHC [Sayuri.Oba@CHW.EDU]

Sent: Friday, November 03, 2006 8:34 PM

To: WICHQ-SFPD

Subject: Breastfeeding

I support the proposel to provide mothers with more nutional food items and provide less formula when mothers are partially bottle feeding with formula. This will encourage mothers to breastfeed longer and provide a strong health benefit for the infant.

Sandi Oba, CLE Glendale Memorial Hospital Glendale, CA 91204 soba@chw.edu From: Carrie Nelson-Pfab [ieatveggies@hotmail.com]

Sent: Friday, November 03, 2006 12:36 PM

To: WICHQ-SFPD

Subject: Docket ID Number: 0584-AD77-WIC Food Packages Rule

Patricia N. Daniels
Director, Supplemental Food Programs Division Food and Nutrition Service United
States Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Docket ID Number: 0584-AD77-WIC Food Packages Rule

Dear Ms. Daniels:

I am writing to express my support for the proposed rule to change the Special Supplemental Nutrition Program for Women, Infants and Children food packages. The health and well-being of the nation's women, infants, and children is a priority of our organization. The proposed changes will greatly benefit vulnerable mothers and children.

As a Registered Dietitian working with the WIC population, I am pleased that the proposed rule closely reflects the science-based recommendations of the Institute of Medicine published in their April 2005 report entitled, WIC Food Packages: Time for a Change. The changes reflected in the proposed rule are also consistent with the 2005 Dietary Guidelines for Americans and national nutrition guidance including those from the American Academy of Pediatrics.

I feel that the changes in the proposed rule are a significant step forward and will improve the overall health of WIC mothers and children by contributing to reductions in obesity and other diet-related chronic diseases. In particular:

- I support adding fruits and vegetables to the food packages of women, infants and children while reducing the amount of fruit juice provided. Increased consumption of fruits and vegetables is associated with reduced risk for obesity and chronic diseases such as cancer, stroke, cardiovascular disease, and type 2 diabetes. Fruits and vegetables added to the diet also promote adequate intake of priority nutrients such as Vitamins A, C, folate, potassium and fiber.
- I support the quantities of dairy products and eggs offered in the proposed rule. These quantities meet the 2005 Dietary Guidelines for Americans. We agree that alternative calcium sources such as soy beverage (soy milk) and tofu are necessary additions to the food packages to address milk protein allergy, lactose maldigestion, personal preferences, and cultural diversity of the WIC population.
- I support the whole grain requirement for cereals and the introduction of whole grain bread and other whole grains such as corn tortillas and brown rice. Whole grain consumption is associated with 1) reducing the risk of coronary heart disease, type 2 diabetes, digestive system and hormone-related cancers, 2) assisting in maintaining a healthy weight, and 3) increasing the intake of dietary fiber.

- I commend USDA's efforts in the proposed rule to support the initiation and duration of breastfeeding, but feel that there should be no test period for the partially breastfeeding food packages for women and infants. The deletion of the pilot phase would speed the implementation of these packages. For women who declare themselves as breastfeeding moms, we urge that, consistent with the IOM recommendation, States be given the option to establish criteria under which infant formula may be provided in the first month.
- To further support breastfeeding, I urge that the cash-value vouchers for fruits and vegetables for fully breastfeeding women be increased to \$10. This change would be cost-neutral and a significant incentive for breastfeeding mothers.

The proposed food packages will provide greater amounts of all of the priority nutrients currently identified as needed by the WIC population. They will supply a reliable and culturally acceptable source of supplemental nutritious foods as well as promote and support exclusive breastfeeding. Equally important, the proposals will provide WIC professionals with the necessary tools to reinforce the nutrition education messages and promote healthier food choices.

WIC is our nation's premier public health nutrition program. The long-term benefits of providing participants with fruits and vegetables, lower fat dairy products and whole grains, as well as additional incentives for fully breastfeeding women will greatly aid WIC in improving the life-long health of our most vulnerable women, infants and children.

I urge publication of a final rule by the spring of 2007 to assure timely implementation of the rule's invaluable changes.

Sincerely, Carrie Pfab, MS, RD, CD

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From: Micaela Alas-San Miguel [oscandmica@sbcglobal.net]

Sent: Friday, November 03, 2006 2:07 AM

To: WICHQ-SFPD

Subject: "Docket ID Number 0584-AD77, WIC Food Packages Rule"

To whom it may concern:

I strongly support to have WIC include \$ for fresh fruits and vegetables as well as whole grains and including other drinks other than whole milk. As a registered nurse at Children's Hospital of San Diego I strongly support these changes to be made in order to provide healthier nutrition for women and their families. I ask that the final rule be published by Spring 2007.

Thank You, Micaela Alas-San Miguel, RN

San Diego, CA

From: Kathy Schupp [kschupp@metrohealth.org] Sent: Friday, November 03, 2006 11:51 AM

To: WICHQ-SFPD

Subject: comments on WIC food packages proposed rule, docket ID number

0584-AD77

Dear Ms. Daniels,

Thank you for the opportunity to provide comments on the proposed regulations that revise the WIC food packages.

As a Registered Dietitian working in an oupatient ob clinic that serves lower income families, I am aware of the important role WIC has in assisting these pregnant women and children to obtain adequate nutrition. I am impressed with the intended changes, and hope they will be implemented by mid 2007. The ability to purchase fruits and vegetables is a great alternative to the high intakes of fruit juice that many women consistently consume. The proposed rule to include whole grain bread and other grains and the inclusion of lower fat milk, less cheese and eggs is consistent with the 2005 Dietary Guilelines for Americans. Hopefully, these changes will be reflected in food choices later in the participants and familys life. I am looking forward to the food package improvements, as it is apparent to me the important role that WIC has in the adequate nutrition of the women that I see on a routine basis. I would hope that the changes will have a positive impact on the current and future health of these women and their families.

Sincerely,

Kathy Schupp, RD, LD

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From: Michaela Stone [mstone@midcoast.com] Sent: Friday, November 03, 2006 10:02 AM

To: WICHQ-SFPD

Subject: WIC Food packages

Dear Ms. Daniels,

As a social worker, I support the WIC Food Packages Proposed Rule and the U.S. Department of Agriculture's efforts to better align the food packages with the Dietary Guidelines for Americans.

I strongly encourage the USDA to provide the full fruit and vegetable benefit recommended by the Institute of Medicine.

I support the promotion of whole grains in the revised food packages and a limit on sugars in WIC cereals.

I do not support the reduction of cheese and eggs as many families I work with rely on these for their protein.

I do support the milk being reduced to skim or low-fat, but not limiting the quantity of milk.

I strongly support USDA's proposed revisions to the WIC food packages to provide greater incentive for breastfeeding. I also support the proposed rule's inclusion of a greater variety of options throughout the food packages to promote greater acceptability of WIC foods by participants.

It is definitely time to update the WIC food packages - the first major food update since the 1970s - 30 years later we need some adjustments!!!!

I hope the USDA will update as soon as possible, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Michaela Stone, LSW

Family Support Worker/PAT Coordinator

Healthy Kids! A Family Resource Network

P.O. Box 689

Damariscotta, Me 04543

207-563-1818

Fax 563-6381

mstone@midcoast.com

10-26-06 emails from Susan Polan [susan.polan@apha.org]



American Public Health Association

Working for a Healthier World

800 I Street, NW • Washington, DC 20001-3710 (202) 777-APHA • Fax: (202) 777-2534 • comments@apha.org • www.apha.org

HP-672

October 25, 2006

Patricia N. Daniels
Director, Supplemental Food Programs Division
Food and Nutrition Service, USDA
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Docket ID Number: 0584-AD77-WIC Food Packages Rule

Dear Ms. Daniels,

On behalf of the American Public Health Association, I am writing to express full support for the Proposed Revisions in the WIC Food Packages. Two members of the Food and Nutrition Section American Public Health Association (Anna-Maria Siega-Riz, PhD, RD and Angela Odoms-Young, PhD) served on the Institute of Medicine's Committee that reviewed the WIC food packages. Our organization of more than 50,000 members from over 50 occupations of public health, including many nutrition professionals who serve as WIC dietitians, agree that the proposed revisions:

- 1. Provide greater consistency with the Dietary Guidelines for Americans (2005)
- 2. Support improved nutrient intakes
- 3. Provide greater consistency with established dietary recommendations for infants and children under age 2, including an encouragement and support of breastfeeding
- 4. Address emerging public health nutrition-related issues such as child overweight
- 5. Provide a wider appeal to diverse populations

We strongly support the addition of fruits, vegetables, and whole grains to the WIC food packages for the first time. We also support the quantities of dairy products and eggs offered in the proposed rule. We are pleased to know that the proposed changes will improve nutrient intakes of iron, fiber and vitamin E, and reduce intakes of saturated fat, cholesterol, total fat and sodium compared with the current food packages. We especially agree with stronger incentives to encourage continued breastfeeding like including additional types and quantities of foods for breastfeeding mothers. To further support breastfeeding, we urge that the cash-value vouchers for fruits and vegetables for fully breastfeeding women be increased by \$2 for a total of \$10 per month. We also agree with incentives that discourage introducing complementary foods before 6 months of age, and support the addition of infant foods and the elimination of juice in the food packages for older infants to promote healthy dietary patterns.

The American Public Health Association believes that the suggested changes to the WIC food-packages are long overdue. The proposed changes have great potential to benefit the health of millions of women and children from all cultures and communities in the U.S. We urge publication of the final rule by the spring of 2007 to assure timely implementation of the rule's invaluable changes.

Sincerely,

Georges C. Benjamin, MD, FACP

Executive Director



American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN



HP-681

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> ···ict X) Curran, MD, FAAP a, FL

amediate Past President ileen M. Ouellette, MD, JD, FAAP October 31, 2006

Patricia N. Daniels
Director
Supplemental Food Programs Division
Food and Nutrition Service
U.S. Department of Agriculture
3101 Park Center Drive
Room 528
Alexandria, VA 22302

Dear Ms. Daniels:

The American Academy of Pediatrics (AAP), a non-profit professional organization of over 60,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults, would like to express its strong support for the proposed revisions to the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) food packages, as published in the *Federal Register* on August 7, 2006.

Since its inception in 1972, the WIC program has provided nutrition education, supplemental foods, and medical referrals to millions of low-income pregnant women, mothers and children. In 2000 alone, the WIC program served 54 percent of all U.S infants and 25 percent of all U.S. children age 1 to 4 years. Unlike food stamps or other human services programs, WIC provides specific nutrients to these populations based on their needs at various stages of development.

The last major revisions to the WIC food packages were made in 1980, with lesser changes made in 1992 to encourage breastfeeding. In the intervening years, significant advances in nutritional science and knowledge have occurred, as well as major changes in the demographics of the population served by the program, the expansion of the U.S. food supply, changes in dietary patterns, and the emergence of obesity as a serious public health issue. As a result, the WIC packages no longer reflect the best nutritional practices to meet the needs of beneficiaries.

The AAP commends the U.S. Department of Agriculture (USDA) for undertaking a methodical, deliberative review of the WIC packages based on the best science available. Perhaps most significantly, the USDA commissioned a landmark report from the Institutes of Medicine (IOM) to review the state of nutritional science and make recommendations for changes to the WIC food packages. WIC Food Packages: Time for a Change was issued by the Institute of Medicine in 2005 and represented a major contribution to this endeavor. The AAP was pleased to note that the IOM made numerous suggestions for changes based on AAP recommendations and policies.

The AAP applauds the USDA for proposing a set of revised WIC food packages based substantially on the IOM's recommendations. Changes such as the addition of fresh fruits and vegetables, emphasis on low-fat options, and reduction of high-fat items align the WIC program firmly with the Dietary Guidelines for Americans and the best nutritional science. The AAP would like to comment in turn on various aspects of the proposed food packages.

Establishment of new "partially breastfed" packages. Since its creation, the WIC program has distinguished only between infants and mothers receiving formula and those breastfeeding. The breastfeeding designation was based on at least one feeding of breast milk per day. The creation of new packages for partially breastfed infants and partially breastfeeding mothers seeks to establish a powerful new incentive for WIC mothers to initiate and continue breastfeeding, even if they are unable to breastfeed exclusively.

Because the AAP supports these new packages so strongly, we urge the USDA to forego the proposed pilot study of their implementation, with the notable exception of the provision of formula in the first month of life (see below). The proposed pilot study of the food packages would unnecessarily delay access to these important options and deny WIC programs a vital tool to encourage women to breastfeed. As an alternative, the AAP recommends that the USDA implement these packages immediately nationwide and select sites in which to monitor implementation and gather data on the effectiveness of the new packages. In addition, the AAP recognizes that some states may face challenges in implementing these new packages quickly, and urges the USDA to provide technical assistance and other support to enable these states to accelerate this process.

Support for breastfeeding in the first month of life. The AAP supports the USDA's goals of encouraging breastfeeding as illustrated by the proposed requirement that mothers choose between either fully breastfeeding or fully formula-feeding in the first month of the newborn's life. A great deal of debate has been generated by the agency's proposal not to provide any formula during the infant's first month in order to encourage breastfeeding, especially for those mothers who have no previous breastfeeding experience. The AAP encourages WIC clinics to establish a "safety net" to monitor these infants closely for failure to thrive since such infants may need "back-up" formula. In addition, any final policy should include an exception to allow medically necessary partial breastfeeding with physician orders during the infant's first month of life. Numerous medical indications for partial breastfeeding can exist, such as for women with abnormal breast anatomy and insufficient milk supply or infants with metabolic disorders. These mothers should be encouraged to partially breastfeed by providing them with the WIC package for fully breastfeeding mothers and an appropriate allowance of formula.

Due to the importance of this issue and the paucity of scientific evidence about the potential effectiveness of this intervention, the AAP urges the USDA to establish modified pilot projects to examine the effectiveness of providing no formula (as proposed in the rule), up to one can of powdered formula (as recommended by the IOM), additional enhancements to the food package for fully breastfeeding mothers, and perhaps

other innovative approaches to encouraging breastfeeding during the infant's first month of life. With rigorous evaluation, such pilot studies could provide valuable data upon which to base this crucial policy decision.

Enhanced packages for breastfeeding mothers. The AAP enthusiastically supports the enhancement of the food packages for breastfeeding mothers to encourage breastfeeding. Human milk is the ideal food for infants, and has been shown to be critically important in improving health, decreasing morbidities, and preventing obesity. Measures to encourage and support breastfeeding will result in tremendous savings to individuals, communities, and the nation as a whole in both improved health and reduced medical and related costs.

The AAP applauds the enhancements to Food Package VII for fully breastfeeding mothers and Food Package V for partially breastfeeding mothers. The AAP remains concerned, however, that some mothers may forego breastfeeding in order to obtain the higher-value packages that provide formula. Further enhancements should be made to Food Packages V and VII to increase the real and perceived value of these packages over those that provide formula. The AAP urges the USDA to consider additional measures, such as an increased cash voucher for fresh fruits and vegetables for fully breastfeeding mothers, the cost of which could theoretically be offset by reduced WIC spending on formula.

Addition of fresh fruits and vegetables. The addition of baby food fruits and vegetables for infants served by Food Package II and the cash voucher for fresh fruits and vegetables for older children and mothers is a major improvement to the WIC program. The new Dietary Guidelines for Americans issued in 2005 established fresh fruits and vegetables as the largest component of a healthy diet. Providing fresh fruits and vegetables through WIC will help families improve their health and establish sound dietary habits early in life.

The AAP was disappointed, however, that the proposed rule reduced the value of the cash voucher proposed by the IOM from \$10 to \$8 per month for mothers, and from \$8 to \$6 per month for children. Even at the higher levels, these vouchers will provide only a very small fraction of the fruits and vegetables recommended for consumption by these groups. Furthermore, the lack of an annual cost-of-living increase to the voucher will quickly erode its value. We urge you strongly to restore the full value of the voucher, include an annual cost-of-living adjustment, and seek funding accordingly from Congress.

Reduction of juice allocations. The AAP recommends that juice not be consumed by infants under the age of six months, and that small children be limited to no more than 4 to 6 ounces of juice per day. The AAP therefore commends the USDA for proposing to eliminate juice from WIC Food Package II for infants and to sharply reduce allocations for children and mothers. Juice provides only modest nutritional value and its overconsumption should be discouraged vigorously.

Adjustment of formula and introduction of complementary foods. The AAP supports provisions of the new packages that reduce formula allocations after the introduction of complementary foods to decrease the likelihood of excess calorie intake. While solid food may be introduced from 4 to 6 months, it should be done slowly and in small amounts not necessary for WIC, as a supplemental feeding program, to provide. The AAP appreciates the inclusion of specific language stating that complementary foods should be introduced individually to allow for the identification of food allergies or sensitivities.

Emphasis on low-fat options. The AAP applauds the USDA for its new emphasis on low-fat choices, especially the shift away from whole milk for children over the age of 2. This change conforms to the AAP's recommendation that children receive whole milk until age 2 and then have fat intake gradually reduced through the toddler years. Low-fat cheese is a useful alternative. In addition, the AAP encourages the USDA to include yogurt as an acceptable substitute for milk for children. The addition of yogurt, as recommended in the IOM report, would provide an easily digested alternative, especially for young children with lactose intolerance, and would encourage the consumption of dairy to enhance calcium intake.

Addition of whole grains. Whole grain fiber is an essential aspect of a healthy diet, and one which many Americans fail to consume at adequate levels. The AAP fully supports the addition of whole grains to Food Packages IV, V, and VII. The AAP recognizes, however, that the requirement that acceptable products contain at least 51% whole grains will eliminate virtually all corn and rice cereals from the WIC program, which could pose difficulties for participants with allergies or sensitivities to wheat and related products. For that reason, the AAP encourages that individuals with medical documentation of relevant allergies or intolerances be allowed to substitute other suitable products.

Adjustment of allocations for milk and eggs. The AAP commends the adjusted allocations of milk and eggs to conform with current dietary recommendations. In the case of children age 1 to 4 years, the AAP urges the USDA to remove the requirement for medical documentation to allow the substitution of soy milk or tofu for milk products. The medical literature does not support any contention that soy milk or tofu are inappropriate substitutes for cow's milk for children in this age group. Families should be permitted to choose these alternatives freely, not only on the basis of medical concerns.

Availability of baby food meats for fully breastfed infants. The AAP supports the addition of baby food meat products to Food Package II for fully breastfed infants to address their heightened need for iron above that required by partially or fully formulafed infants.

Exclusion of Vitamin D drops. The AAP urges the USDA to reconsider its decision not to provide Vitamin D drops to breastfeeding infants. While Vitamin D is not a "food," it is a critical nutrient for developing infants and children. Breastfed infants are particularly vulnerable to Vitamin D deficiency because the Vitamin D content of human milk is

low. The AAP urges the USDA to provide Vitamin D drops to breastfeeding infants in the WIC program, as well as to older children not receiving one liter of vitamin D fortified milk or formula per day.

Shifting between food packages. The proposed rule states clearly that mothers may shift from the food packages for fully or partially breastfeeding mothers to the one for formula-feeding mothers at any time. The AAP encourages the USDA to consider allowing mothers to move similarly from the formula-feeding to breastfeeding food packages. Mothers who begin formula-feeding but wish to transition to partially or fully breastfeeding their infants should be supported in that effort.

Evaluation of food package changes. The AAP exhorts the USDA to ensure that studies are established to measure and evaluate the impact of the many proposed changes to the WIC food packages. Reliable scientific data will be vitally important in assuring that the changes are having the intended effect and improving health outcomes for both children and mothers.

In closing, the American Academy of Pediatrics again commends the U.S. Department of Agriculture's Food and Nutrition Service for proposing thoughtful, science-based changes to the WIC food packages. If the AAP may provide further assistance or information, please contact Cindy Pellegrini in the Academy's Washington Office at 202/347-8600. We look forward to continuing the long, fruitful partnership between pediatricians and the WIC program to improve the health of our nation's children and families.

Sincerely,

Jus Berkerhamer

Jay E. Berkelhamer, MD, FAAP President

JB:cp

¹ Committee on Nutrition. The Use and Misuse of Fruit Juice in Pediatrics. *Pediatrics*, Vol. 107 No. 5 May 2001, pp. 1210-1213.

[&]quot;Kleinman, R., ed. Pediatric Nutrition Handbook, 5th Ed. American Academy of Pediatrics, 2004, p. 126. "Ibid, p. 349.

MessageFrom: Bonnie Hallam [bhallam@thefoodtrust.org]

Sent: Wednesday, November 01, 2006 5:00 PM

To: WICHQ-WEB

To Whom It May Concern:

I wanted to voice my support for the proposal to give WIC participants vouchers to purchase fruits and vegetables. As a professional working in the field of child nutrition, I feel very strongly that we need to find as many ways as we can to increase the fruit and vegetable consumption of children and families. I have seen this work very well with seniors and I believe it will work equally as well with WIC participants. Thank you for proposing this rule and I encourage swift adoption of it. Bonnie Hallam

aturu tarah ura mutu tan tantutun dinunun tun nunun tantun herin menerah dan nuntuk tantunum dan d Docket ID Number 0584-AD77, WIC Food Package RulesFrom: Judy Sopenski

[Judy.Sopenski@hhcinc.org]

Sent: Thursday, November 02, 2006 12:59 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Package Rules

To: Patricia Daniels, Director, Supplemental Food Programs Division

I am a Community Resource person at the Holyoke Health Center who cares about the health and well-being of women, infants and children in the two cities we serve in Western Massachusess. Holyoke and Chicopee are both cities that suffer from poverty and all the attendant issues that come with poverty: high rates of childhood obesity, asthma, diabetes, and other childhood and adult diseases.

I am writing to urge that the WIC Food Package Rules be adopted and that WIC recipients would be provided with the ability to purchase fruits, vegetables and whole grains as well as low fat dairy products as part of their WIC allowance both in stores and at farmers' markets. Both Holyoke and Chicopee have recently sponsored farmers' markets in the downtown area and the women and children we serve would benefit from being able to access the fresh fruits and vegetables they provide.

I urge you to recommend passage of the new WIC food package rules. Our patients would benefit from the addition of these foods and these changes could help to reduce the incidences of childhood obesity and start children on a lifetime of healthy food choices.

Thank you

Judy Sopenski Holyoke Health Center



November 3, 2006

Patricia N. Daniels, Director Supplemental Food Programs Division Food and Nutrition Service USDA 3101 Park Center Drive Room 528 Alexandria, Virginia 22301

Dear Ms. Daniels:

The Association of State and Territorial Nutrition Directors convened a work group to review the USDA's proposed revisions to the WIC Food Package. The work group wishes to express appreciation to the USDA and IOM Committee members who exceeded expectations of the Public Health Nutrition and WIC communities by incorporating current science in developing this proposal. The revised WIC Food Package is the first step by USDA to align food assistance programs with the 2005 Dietary Guidelines and My Pyramid. ASTPHND especially applauds proposed revisions that promote balance, support WIC nutrition education messages and increase flexibility for nutrition professionals working with vulnerable populations.

The attached comments are submitted with great respect for the work already accomplished.

Sincerely,

Miriam Gaines, RD, LD, MACT

ynium Oplaine, MCT, RO, LO

President

ASTPHND Comments Proposed Revisions to the WIC Food Package November 3, 2006

I. Comments on Food Package I and II:

ASTPHND agrees with proposals to

- Implement a definition of partial breastfeeding that will maximally support breastfeeding.
- Enhance the food package for breastfed infants with baby food meats and additional fruits and vegetables.
- Eliminate juice from the infant's food package and add baby fruits and vegetables.
- Adjust the amount of formula provided based on the infant's age.
- Delay the introduction of solids (cereal and baby fruits and vegetables) until 6 months of age.
- Restrict the addition of sugars, starch or salt to baby foods provided to WIC infants.

Potential challenges associated with changes and suggested solutions.

- ASTPHND foresees that there will be situations in which breastfeeding infants will need some supplemental formula and therefore suggest that one can of powdered formula be allowed in the first month. The committee members suggest that the restrictions on formula for fully breastfeeding infants be piloted.
- Formula will be reduced for infants from 6 11.9 months of age, but this is compensated by adding infant fruits and vegetables. WIC nutrition educators are excited about the opportunity to discuss this new benefit with participants. Early introduction of fruits and vegetables is expected to increase acceptance later on in life, and will be demonstrated to participants who use this option.
- WIC nutrition educators will need preparation to deal with concerns expressed by parents and the public over several proposed changes: reduced formula allotment after 6 months, elimination of low iron formula and delay in introduction of cereal

II. Comments on Food Package III

Food Package III is for infants, children and women who require any medically prescribed foods. Under this proposal, infants who require special formulas will be moved from Food Package I or II into this category. Currently, all infants receive standard or a physician prescribed formula within the context of Food Package I or II. Cost and indicators of the use of special formulas in the WIC Program can be tracked through this new food package.

Food Package III will be liberalized, allowing flexibility to the CPA to add foods from the life-stage-appropriate food package up to the level allowed for the life-stage appropriate food package. The committee supports this improvement which prevents women and children receiving special formula from having to decide between receiving a special formula or the standard food package. CPAs and dietitians will need to carefully evaluate the participant's needs and abilities in tailoring Food Package III.

Infants receiving formula through Food Package III will have the same adjustments to allowable volume as infants receiving Food Package I and II.

Potential challenges associated with changes and suggested solutions.

Page 44815 (C)(iii)(v) This section implies that a prescription will be required to issue foods other than formula to participants covered under Food Package III. For example, a prescription would be required for a woman to receive cereal or a child to receive infant fruits & vegetables. This would be burdensome to agencies and the physicians that oversee their health care. ASTPHND suggests eliminating this requirement and leaving the decision to the professional judgment of the registered dietitian.

III. General Comments on Foods Included in Food Packages IV - VII

This section provides general comments pertaining to food categories included in food packages IV, V, VI and VII.

The most notable change is the addition of fruit and vegetable products which ASTPHND strongly endorses. The Association strongly recommends that funding be found to support IOM's recommendation which provides \$8 in vouchers for children and \$10 for women.

ASTPHND agrees with the following proposed changes to Food Packages IV-VII:

- Requiring that the fruit and vegetable products purchased with WIC checks not contain any added sugars, fats or oils.
- Reducing juice. The vitamin C content of the food package remains adequate for the population.
- Restricting milk choice to whole milk for children less than 2 years of age and 2% or less for children over two years of age and women.
- Allowing substitution of calcium fortified soy beverage or calcium set tofu for milk.
- Expanding whole grain options in the WIC Food Package.
- Ability to substitute canned beans for dry beans for women and children.
- Allowing low fat peanut butter that meets the standard of identity for peanut butter, thus ensuring that WIC participants receive the intended nutrients.
- Including sardines and salmon as choices in the canned fish category for fully breastfeeding women.

Proposed changes that may require additional clarification

In reviewing the proposed WIC food package, ASTPHND Work Group members raised the following questions regarding the implementation of the WIC Food Package.

<u>Juice</u>. The maximum amount of juice allowed would require states to approve and stores to provide both 46 and 64 oz cans of shelf stable juice. This could cause confusion and an administrative burden to vendors. The following table demonstrates that it will be difficult for consumers to purchase the full amount allowed and that it will be unclear

which size product is the best to purchase. Vendors would need to carry both sizes in order to best serve their customers.

Food Package	Fluid oz juice	# 46 oz cans	#64 oz cans
IV – Children	128 oz	2.78	2
V – Pregnant	144 oz	3.13	2.25
VI – Postpartum	96 oz	2	1.5
VII - Breastfeeding	144 oz	3.13	2.25

<u>Breakfast Cereals</u> must be at least 51% whole grain. Iron and sugar standards for cereals remain the same as in the current food package. ASTPHND supports this recommendation, but pose the following questions for clarification.

- How will appropriate products be identified? Food labels on cereals and other grain products do not currently show the amount of whole grains by weight or percentage. Although amount of fiber is listed, it does not always correlate with whole grain content. ASTPHND agrees with those who recommend allowing any grain product that lists whole grain flour as the first ingredient. State agencies would also appreciate a list of approved products from USDA.
- Persons with celiac disease or allergies to wheat may have difficulty finding acceptable whole grain products. The workgroup recommends allowing exceptions.

Whole wheat bread often is packaged in sizes other than 1 pound. Since a common size is 24 oz, we recommend allowing up to 24 ounces.

<u>Tortillas.</u> While most soft corn tortillas do not have added fat, the whole wheat tortillas usually contain a small amount of fat. ASTPHND recommends that the standard be revised for tortillas to allow this small amount of fat. Without this exception, whole wheat tortillas meeting the standard may not be available.

Fruits & Vegetables.

Farmers' markets would be a great option for WIC participants when they are shopping for fresh fruits and vegetables. However, because the proposed rule requires that States use existing vendor selection criteria and vendor agreement requirements, states would be unable to authorize farmers for the following reasons:

Challenges -

• Farmers' markets do not meet the existing federal selection criteria. 246.12(g)(3)(ii) states, "The State agency must establish minimum requirements for the variety and quantity of supplemental foods that a vendor must stock." Farmers would have to maintain a minimum quantity of supplemental foods in each food category to meet the current selection criteria.

- Farmers generally do not sell their products from fixed locations. Current definition states "Vendor means: Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan..."
- Currently, a large percentage of farmers participating in farmers' markets submit the redeemed WIC "checks" now issued for fruits and vegetables to the market manager. The market manager pays the farmers in cash and then deposits the "checks" into the market's bank account. However, pursuant to Health and Safety Code 123315 the authorized vendor shall "deposit the nutrition coupons directly in the vendor's account and not transfer them for cash payment, credit, or any other benefit to any party other than the vendor's bank or the states".
- Farmers would be held to current monitoring requirements including audits. Audits require vendors to produce invoices which would not be possible for the farmers as they produce the product they sell.
- Increases administrative burden by adding additional farmers' market vendors to the existing caseload of vendors. The farmers must be reviewed for authorization, trained, and monitored.
- Current criteria used to select WIC food vendors states, "the prices the
 food vendor charges for foods in relation to other stores in the area or
 other stores of similar size and/or volume". The current FMNP does not
 collect prices for items sold. WIC would be required to compare farmers'
 prices to regular vendor prices under the proposed rule.
- Increased training for local agencies, participants, farmers, and grocery stores.
- WIC would have to issue ID's and passwords to farmers' to submit serial numbers of food instruments for payment. This might deter farmers from participating in the WIC program
- Current vendor agreement provision prohibits vendors from allowing the participant to purchase additional items when the actual selling price is less than the maximum dollar amount printed on the food instrument. If we use the current FMNP regulations/guidelines they allow farmers to accept cash or food stamps to cover the purchase beyond the value of the check.

Suggestions -

• Revise the Proposed Rule to make it feasible for farmers' markets to become an alternate location for WIC participants to redeem their cash-value food instruments. Farmers' markets are distinct from the current vendor model in many ways. For example, they do not have a fixed location; they do not carry the other foods that WIC authorizes; stocking requirements that apply to regular vendors therefore would not be applicable; and they do not have invoices for auditors as they themselves produce the food they sell.

• In order to accommodate the farmers' markets as authorized vendors, USDA should consider modeling program requirements for farmers' markets after the highly successful model of the Farmers' Market Nutrition Program rather than applying the same food delivery requirements as currently applicable to authorized grocery stores.

<u>Soy products</u> are allowed for women, but must meet certain specifications. Children may only receive soy products with a physician's prescription.

- Soy products must meet nutrient specifications shown in a table on page 44801. The committee questions whether products meeting these specifications are currently available on the market. We request that USDA provide state agencies with a list of approved products.
- The requirement for a physician's prescription for a child to receive soy products as substitutes for cow's milk presents an undue burden on participants, their physician and the WIC CPA. This decision should be left to the discretion of the CPA.

Concerns raised by industry. ASTPHND is aware that the dairy and juice industries are raising concerns that the proposed food package will limit availability of these foods to participants. ASTPHND wishes to go on record as dismissing this argument. The WIC Food Package as proposed more closely reflects USDA recommendations as reflected in My Pyramid and the U.S. Dietary Guidelines. Adequate calcium and vitamin C are provided in the proposed food package. The reduction in milk allotment may be criticized considering the fact that many women do not meet their calcium needs. However, the calcium content of this food package is only reduced from 1199 mg to 1063 mg which ranges from 82% to >100% of the AI. This change maintains cost neutrality while adding more variety and flexibility in the other food groups, and adding fruits and vegetables. The proposed food package is closer to meeting the recommendations set forth in the U.S. Dietary Guidelines and My Pyramid. The proposal is a more balanced approach and is in keeping with the intention of USDA to offer WIC as a supplemental nutrition program.

IV. Summary

The proposed revisions to the WIC Food Package reflect current science and dietary recommendations and are wholeheartedly supported by the Association of State and Territorial Nutrition Directors. Concerns about implementation have been outlined in this letter and include:

- regrets that the IOM proposal to provide \$8 for children and \$10 for women for fruits and vegetables vouchers was reduced to \$6 and \$8 respectively;
- burden of requiring physician's prescription for non-medical foods in Food Package III and soy beverages for children;
- practicality of certain specifications for foods allowed in food packages IV VII, such as pound size for whole grain breads, nutrient specification standard for soy beverages and fat-free cortillas.

ASTPHND encourages USDA to release the final rule in the spring of 2007. We request that USDA work with states in implementing the new rule and allow a reasonable degree of flexibility as states determine strategies that work best for their unique system requirements.

ASTPHND is also concerned about the possible impact of this new rule on other programs. We strongly support maintaining the WIC Farmers' Market Nutrition program.

We thank you for this opportunity to comment on the proposed revisions to the WIC Food Package and look forward to working with USDA in implementing this extensive proposal.

From: Barbara D. Beck [BBECK@gradientcorp.com] Sent: Saturday, November 04, 2006 7:00 AM

To: WICHQ-SFPD

Subject: "Docket ID Number 0584-AD77, WIC Food Packages Rule,"

USDA

we should do everything we can to encourage and facilitate the use of wic certificates at local farmers' markets. in an age of ever increasing obesity (that hits the poor disproportionately) - what better thing to be doing than making it easier for poor families to partake of high quality fruits and vegetables.

specifically I encourage the following (and yes, I do vote - every year...)

- "Do no harm" to the WIC Farmers' Market Nutrition Program (FMNP). Do not reduce FMNP funding or establish procedures that would adversely affect its operation or effectiveness.
- Apply the proposed regulations, especially those that makes farmers' markets eligible WIC vendors.
- farmers' markets should be allowed to participate in the WIC program as seasonal vendors, and be exempt from the "WIC-only" cost containment requirements, and not be required to carry a full-range of WIC food package products.
- there should be no limit placed on the type of fresh fruits and vegetables that may be purchased with the new fruit and vegetable coupons.

sincerely

Barbara Beck
Barbara D. Beck, Ph.D., DABT
Gradient Corporation
20 University Rd
Cambridge, MA 02138

phone 617 395 5000 fax 617 395 5001 email bbeck@gradientcorp.com

http://www.gradientcorp.com

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From: mcalabro@kent.edu

Sent: Saturday, November 04, 2006 10:30 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

I have been a public health nurse in the past & am a Pediatric Nurse Practitioner. I have worked in WIC as well. I agree with some changes & disagree with others. see below.

1) I encourage USDA to provide the full fruit and vegetable benefit as recommended by the Institute of Medicine. 2) I support the promotion of whole grains in the revised food packages, I strongly support the proposed reductions in the quantities of cheese in the food packages to decrease saturated fat and cholesterol intake, and urge USDA to require all cheese offered in the food packages to be light, reduced, or low in fat.

***I do notsupport the reduction in eggs- research has shown that in people with normal choolesterol, eggs do not raise blood levels. Eggs are an important source of iron and protien, nutrients that are insufficient in toddlers & preschoolers (FITS- feeding infants & toddlers study).

***In 1978 or so, King Vitamin was banned from inclusion. the outcry was so great, that it was re-instated a few years later.if children eat sweets as a part of their regular diet, they will avoid plain or low sugar cereals. so, you are defeating the purpose of fortified cerels, esp Vit Bs.
Mary Calabro RN, C, PNP, MSN

Sincerely,

Mary Calabro RN, C, PNP, MSN 4436 Leewood Rd Stow, Ohio 44224

From: WebMaster@fns.usda.gov

Sent: Saturday, November 04, 2006 4:15 PM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Joy Petterson

EMAIL: joypetterson@hotmail.com

CITY: Portland STATE: OR ORGANIZATION: CATEGORY: Other

OtherCategory: dietetic intern Date: November 04, 2006

Time: 04:15:12 PM

COMMENTS:

As an Oregon dietetic intern, greatly invested in the health of Oregon's citizens, I am writing to show my support for the revisions in the WIC food packages proposed by the USDA.

The following letter, written by the Community Food Security Coalition in Venice, California, powerfully demonstrates several reasons how and why these changes are necessary. I am in full support of their suggestions and insights as outlined below:

"In light of the severe health and dietary challenges confronting many Americans, especially lower income families and children, it is heartening to see a proposal that will allocate a greater share of public nutrition assistance resources for the healthiest foods available. The introduction of fruits and vegetables, particularly fresh ones, for the WIC food packages will not only encourage healthy eating for the program's mothers and children now, but will also encourage a lifetime of healthier eating for the future.

Over the last 30 years, farmers' markets have played an increasingly important role in bringing fresh, locally produced fruits and vegetables to the nation's communities. Because they have been particularly successful in making fresh produce available in lower income urban and rural areas, and especially to WIC participants, we focus our comments on the proposed revisions that address the inclusion of farmers' markets as eligible vendors.

According to USDA, there are now 3,740 U.S. farmers' markets (a number that is continuously growing) serving millions of consumers and providing tens of thousands of farmers with strong market outlets for locally produced food. They operate in every state, nearly every major city, and can be found in almost every county. Farmers' markets have been enormously successful in bringing a wide selection of affordable, extremely fresh, and locally grown produce to places that have been traditionally under served by

other forms of affordable, retail food outlets. Among other places, the acceptance of farmers' markets by WIC participants is evident in a Los Angeles research study (E. Jenks, et.al., University of California, Los Angeles) that found that WIC participants redeemed 90.7 percent of their special fruit and vegetable coupons at a farmers' market compared to 87.5 percent at a supermarket even though the location and the hours of the supermarket were more convenient.

To be successful in under served, often lower income neighborhoods, farmers' markets have had to learn the specific fresh food preferences of their residents. This has frequently meant that farmers have tailored their crop selection and marketing to the traditional food preferences of a wide variety of racial and ethnic minority groups, and in many cases, newly arrived refugee and immigrants groups. Such efforts have sometimes been aided by programs that provide training and start up needs to new and immigrant farmers who are from the same communities as WIC shoppers. The result is that new farmers are growing and marketing food at farmers' markets that is preferred by these same minority, refugee, and immigrants groups.

All in all, farmers' markets have improved the access of some of America's most nutritionally vulnerable people to fresh, affordable produce. And without good access to healthy food, nutrition education and increased buying power will have little effect.

A complementary aspect of farmers' market growth in low-income communities has been the development and gradual expansion of USDA's WIC Farmers Market Nutrition Program (FMNP), started in1989 and further extended by the development of the Senior Farmers Market Nutrition Program in 2001. The WIC FMNP now operates in 46 states, U.S. territories, and tribal nations and served approximately 2.7 million WIC recipients in 2005, a number which represents a third of all WIC recipients. Surveys conducted over the years by state and tribal agencies, which administer the WIC FMNP consistently find that the modest benefits provided to WIC recipients (usually about \$20 per recipient annually) result in greater consumption of fresh fruits and vegetables among recipients. When WIC offices and other participating organizations, including the farmers and farmers' markets themselves, provide nutrition education information and activities to WIC recipients, the value of the FMNP vouchers is enhanced and the long-term consumption of fresh fruits and vegetables is more likely to occur. Just as farmers' markets have brought fresh produce to economically distressed communities, the FMNP has brought more socially and economically disadvantaged families to farmers' markets.

The WIC FMNP has two major benefits that will enhance the effectiveness of providing special produce vouchers that can be redeemed at farmers' markets. First, the FMNP coupons in themselves provide a strong boost to the viability of low-income farmers' markets; many such markets might not operate without such a program. Secondly, by operating WIC FMNPs, states and tribal organizations have developed the organizational and administrative capacity they will need to operate the proposed WIC produce voucher program. The current procedures for WIC FMNP benefit distribution, redemption, and accountability are very consistent with the proposed revisions pertaining to fruit and vegetable vouchers. FMNP agencies (generally state health and agriculture departments)

other accountability procedures as well as procedures to authorize participating farmers and farmers' markets. Additionally, both the development of farmers' markets and the implementation of the WIC FMNP require working partnerships and collaborations between multiple agencies and organizations, both public as well as private. These experiences and practices, developed over the course of 17 years of operating the WIC FMNP, should allow state and tribal WIC agencies to make a relatively smooth transition to the implementation of the proposed fruit and vegetable voucher system.

In order for WIC recipients to secure as much nutritional value as possible from the use of the proposed fruit and vegetable WIC vouchers at farmers' markets, we offer the following comments and recommendations for inclusion in the WIC Food Package regulations:

- USDA shall do no harm to the WIC Farmers Market Nutrition Program either through reducing current funding levels or establishing rules, systems, or procedures at the federal or state levels that would adversely affect the operation and effectiveness of the WIC FMNP.
- Coordination shall be required between the proposed WIC fruit and vegetable voucher program and all existing and future federal-state WIC Farmers Market Nutrition Programs.
- Farmers and farmers' markets that are currently authorized under state WIC FMNP procedures shall be automatically eligible for vendor specification under the new fruit and vegetable voucher program. These WIC FMNP farmer and farmers' market authorization procedures shall also be applied by states in the future vendor specification process.
- States shall be required to allow farmers' markets as eligible vendors for fresh fruits and vegetables, with the provision that they comply with farmers' and farmers' market authorization procedures.
- Farmers and farmers' markets that are currently authorized under state WIC FMNP procedures shall be automatically eligible as WIC vendors for the new fruit and vegetable vouchers issued by the WIC program. The WIC FMNP farmer and farmers' market authorization procedures shall also be applied by states as the vendor requirements for farmers or farmers' markets for this program.
- With respect to vendor requirements, farmers' markets shall be allowed to participate as seasonal vendors since most farmers' markets in the country are unable to operate year round. Similarly, farmers' markets shall be exempt from the "WIC-only" cost containment requirement and shall not be required to carry a full-range of WIC food package products.
- When practicable, states should seek to develop systems for the distribution and use of fruit and vegetable vouchers that are compatible with existing WIC FMNP procedures. Nutrition education efforts and state and local promotion of fresh fruit and vegetable vouchers should be compatible with and seek to take advantage of existing WIC FMNP education and promotion practices. States should be encouraged to reduce the administrative costs associated with a fruit and vegetable voucher system by developing systems that are compatible with their respective WIC FMNPs

• In the event that states adopt EBT technology for the use of nutrition benefits by WIC-recipients, farmers' markets must also be provided with the most practical EBT systems for the fruit and vegetable redemption process.

With respect to all vendors that may be specified under this program and other key operational issues for the new fruit and vegetable voucher program, the Community Food Security Coalition recommends the following rules:

- State agencies shall not have the authority to limit the range of fruit and vegetable items that may be purchased with fruit and vegetable vouchers, though preference shall be given to fresh fruits and vegetables first, then to frozen, and lastly canned.
- There shall be a cost of living adjustment reflected in the value of the vouchers in order to keep pace with inflation.
- The denomination of fruit and vegetable instruments shall be in small amounts such as \$1.00 and \$2.00 denominations.
- No change shall be given for vouchers that don't purchase their full denominational value.
- Consistent with Institute of Medicine's recommendation, we support the amount of \$10 per month of fruits and vegetables for mothers and \$8 for children.
- State advisory groups shall be established to develop the most effective and responsive system possible for operating the fruit and vegetable voucher program. Where states and/or municipalities have food policy councils, their participation in the advisory process is strongly encouraged.
- Just as farmers' markets have been pioneers in making the best fruits and vegetables available to people and places that need them the most, CFSC recommends that WIC encourage the availability of high quality fresh fruits and vegetables in all outlets that serve WIC recipients. In this regard the national WIC Program should consider implementing pilot projects that test various methods of increasing access to fresh produce in a variety of retail food outlets, including farmers' markets, in areas that are poorly served by such outlets."

I thank you for the forward-looking proposal to make fruits and vegetables a regular part of the WIC food package. This advance in the food package will not only prove immeasurably valuable for lower income women and children, but also assist the nation's family farmers for whom farmers' markets are essential to preserving their livelihoods. Farmers' markets can make a substantial contribution to the success of this new initiative, one that promises to provide a healthy tomorrow for all Americans.

Sincerely, Joy Petterson, MS

Sent: Saturday, November 04, 2006 5:07 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Dorothy Richmond, M.D.

EMAIL:

Richmond@gunet.georgetown.edu

CITY:

Bethesda

STATE:

MD

ORGANIZATION: Georgetown University CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 04, 2006

Time:

05:07:25 PM

COMMENTS:

Juice should be deleted from the WIC program. It provides no nutritional benefit but adds calories. It should be replaced with fresh fruit.

From: Suzanne Murphy [Suzanne@crch.hawaii.edu]

Sent: Saturday, November 04, 2006 7:54 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

November 4, 2006

Patricia N. Daniels, Director Supplemental Food Programs Division Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, Virginia 22303

Re: 7 CFR Part 246, RIN 0584-AD77, Revisions in the WIC Food Packages

I am writing to express my support for the excellent proposed rule for the revisions of the WIC food packages. As chair of the former Institute of Medicine's Committee to Review the WIC Food Packages, I was very pleased to note that the rule incorporates almost all of the recommendations of the committee. As the committee has finished its task and has been disbanded, the comments in this letter reflect my professional recommendations as a nutrition scientist and not as the committee's chair.

I appreciate the time and thought that underlies the proposed rule, and fully support the recommendations. The staff at the Food and Nutrition Service are to be congratulated for the comprehensive proposed rule. If the food package changes are implemented as proposed, they will greatly improve the health of low-income mothers, infants, and young children in the United States.

Following are three changes that I would suggest. I have tried to consider the economic constraints under which the WIC Program operates, as well as the science that supports these changes:

1. Fruit and vegetable vouchers: It is my sincere hope that additional funding for the WIC Program will be made available so that the extra \$2 for fruits and vegetables can be restored to the food packages. The fruit and vegetable voucher is a key new addition that brings the WIC packages more in line with the 2005 Dietary Guidelines. Furthermore, implementing the new procedures for fresh fruits and vegetables will take considerable effort, and it would be more worthwhile (especially for retailers) if the full amount of \$8 for children and \$10 for women was made available. If funds are not currently available to provide the higher amounts to everyone, I would strongly argue for having \$10 vouchers included in Package VII for fully breastfeeding women. This will add an even greater incentive for women to fully breastfeed.

- 2. Yogurt as a milk substitute: I also hope that funds can be located to allow yogurt as a milk alternative. Osteoporosis-is-increasingly-common in-the United-States, and increasing calcium intakes among children and women is a public health priority. WIC can help by offering yogurt, particularly for participants who do not regularly consume adequate amounts of milk. If funds do not allow yogurt as a choice for all participants, I recommend that Package VII for fully breastfeeding women be enhanced to include yogurt as a milk substitute.
- 3. Proposed timeline for implementation: I fully support a pilot study (in up to 32 sites) of the new recommendations for partially breastfeeding women and their infants, and particularly of the intent to not supply any formula in the infant's first month. However, I am concerned about the timeline for implementation of these recommendations, and what aspects of the revised packages will be delayed until the pilot studies are complete. In the three-year interim, I recommend that the category of "partially breastfed infant" be implemented as recommended, and that these infants receive approximately one-half as much formula as the fully-breastfed infants. The mothers of these infants would be eligible for the more attractive Food Package V rather than Food Package VI. By reducing the amount of formula supplied to these partially breastfed infants, mothers are encouraged to breastfeed more often, and the cost of Food Packages I and II is substantially reduced for these infants. Until the pilot studies are conducted and evaluated, an interim solution for the infant's first month is to extend the "partially breastfed infant" category to include all infants from birth. That would mean that women would have three choices for a newborn infant: receive no formula (woman receives the fully breastfeeding package VII); receive full formula (woman receives the nonbreastfeeding postpartum package VI); or receive half the amount of formula (woman receives the partially breastfeeding package V). If the pilot studies determine that it is best not to offer formula in the first month, then the third option (receive half the amount of formula) could be withdrawn for the infant's first month for women who intend to breastfeed.

Once again, I congratulate the Food and Nutrition Service on the scope of the proposed rule, and I look forward to its full implementation.

Sincerely,

Suzanne P. Murphy, PhD, RD Research Professor, and Director, Nutrition Support Shared Resource Cancer Research Center of Hawaii University of Hawaii 1236 Lauhala St., Suite 407 Honolulu, HI 96813 From: Debra Waldoks [debrawaldoks@yahoo.com] Sent: Saturday, November 04, 2006 8:11 PM

To: WICHQ-SFPD Subject: WIC Package

To whom it may concern:

I support the stronger incentives for continued breastfeeding by providing less formula to partially breastfeed infants and providing additional quantities/types of food for breastfeeding mothers and infants. These changes will promote and support long term successful breastfeeding, which is a key early step in obesity prevention.

Debra Waldoks, RD MPH Candidate, Columbia University Mailman School of Public Health From: Tammy Beasley [tammy@revitupfitness.com]

Sent: Sunday, November 05, 2006 2:11 PM

To: WICHQ-SFPD

Subject: Docket ID # 0584-AD77, WIC Food Packages Rule

As a registered dietitian, I am concerned that the proposed changes being made to the USDA administered WIC supplemental feeding program may result in lower dairy consumption for millions of American women and children. The proposed changes include more fruits and vegetables, which is certainly to be commended. However, one of the proposed changes would allow women to substitute soy fortified beverages for milk without any medical need for the substitution. Also, the proposed change lacks the ability for participants to substitute yogurt for milk.

Soy fortified beverages are not the nutrition equivalent of milk. Research has shown that in most fortified soy beverages, the added calcium actually settles at the bottom of the container and is very difficult to keep in suspension; therefore, most of the added calcium is not available to the consumer. Women and children's need for adequate calcium to prevent osteoporosis is not disputed – and the proposed change may limit the ability of many women and children to receive the calcium they need. And since yogurt is easier to digest, it is an ideal substitute for someone who is lactose intolerant. Without this option for many women and children, another great source of calcium would be limited.

Please consider clarifying these important points before the changes proposed are adopted. Thank you!

Tammy Beasley, RD North Alabama Media Representative Alabama Dietetic Association

Tammy Beasley, RD, LD, CEDSN 256-682-2301 tammy@revitupfitness.com www.revitupfitness.com

Sent: Sunday, November 05, 2006 10:41 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Joanne Burke, Ph.D., R.D. L.D.

EMAIL: Joanne.Burke@unh.edu

CITY: Durham STATE: NH

ORGANIZATION: University of New Hampshire

CATEGORY: Other

OtherCategory: Director, Dietetic Internship, University of New Hampshire

Date: November 05, 2006

Time: 10:41:14 PM

COMMENTS:

Misguided adherence to the "cost neutrality" concept threatens to undermine the potentially positive impact of proposed revisions to the food/formula component of the federally funded Special Supplemental Nutrition Program for Women, Infants and Children (WIC). WIC serves over 8.5 million financially fragile individuals at nutrition risk. Over sixty percent of participating households have annual incomes at or below \$20,000 for a family of four; households above 185% of poverty, or \$38,500 exceed eligibility criteria. Children and families living at poverty level are far more likely to suffer from inadequate and imbalanced dietary intakes than those living in food secure households.

To its credit, the August 7th proposed WIC food/formula package revision from Agricultural Secretary Mike Johanns and USDA's Food and Nutrition Service incorporates many health promoting nutrition recommendations. Revised packages will now include an allowance for fruits, vegetables, and selected whole wheat products. The inclusion of a wider range of healthy food products will provide more healthy choices and more options for participants representing culturally diverse groups. Enhanced food packages are proposed for lactating women, and should help to support a woman's decision to breastfeed. In addition to the nutrition advantages of breastfeeding for the mother and infant, cost savings are realized via a reduction in formula allocations.

However, the proposed legislation is critically flawed based on the rationale of cost neutrality. In an effort to keep the costs of the program at the current rates, of \$38.00 per month, or about \$1.25 per participant per day, full adaptation of suggested improvements proposed in the 2005 Institute of Medicine "WIC Food Packages: Time for a Change have been modified. First, the Institute suggested that the reimbursement for fruits and vegetables equals a total reimbursement of ten dollars a month for women, and eight dollars a month for children; the USDA submitted proposal reduces this already conservative amount to eight dollars for women, and six for children.

Secondly, the Institute report had identified calcium as a nutrient to give highest priority to in WIC food packages based on current levels of intake in adolescents and adult women of reproductive age, and Vitamin D as one to encourage. Unfortunately, despite being an excellent source of calcium, the cost of yogurt, was cited as a reason to exclude it from the dairy options. Yogurt is a healthy food choice, is portable, tolerated by many who are lactose intolerant, and can supply approximately 25 % of the daily calcium allowance. Manufacturers could be encouraged to add vitamin D to this product and address two nutrients of concern.

Neither the IOM report nor the USDA revisions include whole grain bread for all participants. Specifically, whole grain breads and cereals are proposed for breast feeding women and children, but only whole grain cereals are allocated for those women are not breastfeeding; this undermines the quality of food in the non-breastfeeding household, and could potentially serve as an inducement for women not to breastfeed.

The WIC program revision does include folate supplements as part of the monthly allocation to women, despite the 2005 USDA Center for Nutrition Policy and Promotion report indicating a greater risk of low folate intakes in those women with incomes <185% of poverty level compared to those above this income. Adequate intakes of folate have been demonstrated to reduce the risk of an infant being born with a neural tube defect, but folate is not presently added to whole-wheat products.

The concept of costs neutrality translates into the continuation of health disparity and limits the full potential of the program. If adopted as a guiding principle, how will cost neutrality impact the design of future food allocations? The full recommendations of the IOM should be restored. There are few programs that serve as many of America's children, working poor and unemployed, with such positive, intergenerational health impacts as WIC. It is the first time since its inception that significant improvements have been suggested for improving the food/formula component of the WIC program. Let's get it right this time, for who knows when we will get this opportunity again.

Sent: Sunday, November 05, 2006 11:31 PM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Jacquelyn Ayeta, M.D.

EMAIL:

aveta@email.chop.edu

CITY:

Philadelphia

STATE:

Pennsylvania

ORGANIZATION: The Children's Hospital of Philadelphia Primary Care Centers

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 05, 2006

Time:

11:31:02 PM

COMMENTS:

As Pediatricians and Pediatric Nurse Practitioners at The Children's Hospital of Philadelphia, we are contacting you in response to the proposed rule that would revise WIC food packages as outlined in the Federal Register dated August 7, 2006. Nearly all of our patient encounters are with nutritionally at-risk infants and children. The majority of these patients under the age of 5 years participate in the WIC program. This proposal will clearly have a direct impact on the lives and health of our patients.

With the substantial rise in childhood obesity and its devastating consequences, we understand the critical nature of educating our families about appropriate nutrition. Not only do our patients receive nutritional advise from doctors, nurse practitioners, and WIC nutritionists, but they also make life-long decisions based upon the foods that WIC supplies. For example, since WIC does not currently provide fruits or vegetables, the message that the families receive is that this type of food is not important. On the other hand, families think that 100% fruit juice is extremely nutritious and will purchase and consume excessive amounts. The children will often drink up to their maximum daily caloric requirements in 100% fruit juice alone.

The proposal for adding fruits and vegetables to the WIC food packages is a step in the right direction. Eliminating juice for the infant food packages is also something that we applaud. The decrease in juice amounts for children under 5 years is a commendable suggestion, however we feel that JUICE SHOULD NOT BE OFFERED AT ALL. Our families need to consume more whole fruits and vegetable and not more juice. The funding for juice would be best placed towards increasing the \$6.00 per month allowance for fruits and vegetables. The funding could alternatively be used toward recruiting more qualified WIC nutritionists to teach our families. It is not likely that our patients will suffer Vitamin C deficiency or associated iron malabsorption if WIC does not provide

juice. Instead, they will experience better nutrition, more appropriate calorie consumption and overall-better health.

Thank you for your consideration.

Signed: 35 Physicians and Nurse Practitioners at The Children's Hospital of Philadelphia Primary Care Centers

From: Paul Dankert [paul_dankert@msn.com] Sent: Sunday, November 05, 2006 8:22 PM

To: WICHO-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

As a Registered Dietitian, working with the WIC Program, I applaud the plans to Revise the WIC food package. These changes are very important. Here are my suggestions regarding these changes:

CHANGES I SUPPORT:

- --The addition of fruit and vegetables--this is so very important. It is hard to counsel people on the importance of fruit and vegetables, when it they are not included in the WIC package. The perception is that they can't be important if they are not part of the WIC benefit.
- --Juice--it is important to reduce the quantity of juice provided. The amount currently allowed is more than the American Academy of Pediatrics recommends for WIC aged children. Excess juice can lead to obesity, cavities and a poor diet.
- -- Eggs--fine to decrease from two dozen to 1 dozen.
- --Beans--I believe that by allowing canned beans more participants will purchase the beans. Beans are so a rich source of protein, and other nutrients while providing little fat.
- --Whole Grains--much of the WIC population are not familiar with whole grains; I believe it is very important that we limit the grains that WIC provides to be whole grains. Providing a variety of whole grains allows for cultural diversities and gives the opportunity of exposing the participants to other whole grain options that they otherwise would not have tried.
- --Milk--I believe that discontinuing the provision of whole milk to women and children is important; this helps to lower the saturated fat and cholesterol content of the WIC package and exposes participants to other milk choices. 2% still provides enough fat to have flavor and won't be too big of a change for participants who are accustomed to drinking whole milk.
- --Soy milk--it is important that WIC women and children participants be allowed the choice of soy milk. Currently, when there are problems with milk tolerance, children have no choice other than soy formula--which is much more costly to WIC.
- --Providing other fish choices for the exclusively breastfeeding mom is very good. It also allows for cultural differences. For instance, our Asian participants like sardines.

--Allowing a combination of regular WIC package foods and formula/medical nutritionals is important and smart. Currently, it's all or nothing--often children with Special Health Care Needs get more formula/medical nutritionals than needed without the other WIC benefits, or he's given the standard WIC benefits without the medical nutritionals that are medically necessary for their well-being. Generally, what happens is that these children more of the medical nutritionals than they need and miss out on the other WIC foods. Besides not meeting the needs of our Children with Special Health Care Needs, this current practice is costing WIC more money. This proposed change to allow these combinations is a win-win change that will benefit both our special children and the WIC Program, itself.

SUGGESTIONS I HAVE FOR OTHER PROPOSED CHANGES:

- --Baby food--instead of supplying expensive baby food--why not provide fresh fruit and vegetables and let WIC nutritionists teach parents how to make their own baby foods?
- -- Regarding the Breastfed baby,

If WIC no longer provides formula to breastfed infants in the first month. Less women will breastfed. I know this, because I tried it at our WIC projects. Mothers are insecure about breastfeeding and getting a couple of cans of formula gives many mothers the courage they need to breastfed.

Not providing formula for the first month will backfire--unless it is for all infants. If you really want to promote breastfeeding--don't provide formlula to any baby, period. Otherwise, allow the breastfed infant to receive a few cans of formula in that first month.

The formula maximums for breastfed babies should account for special situations--such as special health care needs, or the working mother. Women often do not face breastfeeding friendly practices in the work place--with no time to pump, no place to pump, no area to store breast milk. Some work long hours and need more formula than the mother fortunate enough to stay home with her infant.

--Regarding Whole milk for the 1 year old. Although it is true that one year old child need more fat for their developing brains, it is a mistake to mandate that all 1 year old children drink whole milk. Some children cannot tolerate milk fat in large quantities. Some 1 years do much better on 2% milk than they do on whole milk. Remember that 2% milk is still a high fat milk. (It has as much fat as 3 strips of bacon in 8 oz). Registered dietitians should be able to assess the child's diet and physical status and determine if the child needs whole milk or can do as well on 2% milk. Realize that there is nothing magical about the fat of cow's milk--other fat sources can ensure proper brain development. I would say no to 1% or skim milk for the 1 year old, but give the Registered Dietitian the ability to determine if 2% is warranted in some cases.

It is time, past time actually, for dramatic changes to the WIC food package. These changes will give us credibility as we teach the Dietary Guidelines and it will help enable our participants to meet these guidelines.

If nothing else, please do increase the fruit and vegetables and insist on whole grains and limit the juice. Do not let the food industry lobbyists compromise the integrity of the WIC program and its benefits.

I look forward to the new WIC food package. Thank you for your hard work and dedication to this issue.

Diane M. Dankert, RD, CD

Sent: Sunday, November 05, 2006 2:17 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Melo

Melody Domingo

EMAIL:

nhanandmel@yahoo.com

CITY:

Sacramento

STATE:

CA

ORGANIZATION:

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 05, 2006

Time:

02:16:50 PM

COMMENTS:

I am currently a student nurse working at a Public Health Office. Many of the clients I visit use WIC. They and I are very excited about the proposed changes to WIC. Adding fruits and vegatables will allow WIC participants to enjoy a diet more consistent with the 2005 Dietary Guidelines.

From: jharding02@hotmail.com

Sent: Sunday, November 05, 2006 6:28 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia Daniels Food and Nutrition Service, USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

Dear Patricia Daniels,

As a WIC nutritionist for over 27 years and a concerned citizen, I strongly support the U.S. Department of Agriculture's (USDA) efforts to improve the nutritional quality of the WIC food packages. As USDA finalizes the regulations, please consider the following suggestions to further strengthen the final rule.

My major concern with the new proposed food package is the reduction in the infant formula for partially breastfed infants.

Most of our breastfed babies fall into this category because of unsympathetic, uncaring or difficult work environments that do not support and provide for the needs of our breastfeeding mothers.

Firstly, mostly due to the high cost of infant formulas, many new WIC mothers exhibit what our office calls "Formula Insecurity", a fear they will not be able to supply their baby with needed formula, either now or in the future. These women value the formula more than any enhanced food package they may receive for themselves as breastfeeding mothers. It is our considered opinion that many women, especially those with older babies who are partially breastfed, will consider the proposed reduced formula package a penalty and will state they are not breastfeeding, when actually they may be, or they will quit any amount of breastfeeding in order to receive an increased amount of formula they feel is needed.

Secondly, although it is the solemn mission of our WIC office to educate moms on the unquestionable benefits of exclusively offering breast milk to their baby, the reality in which many of these mothers exist prohibits this and often times allows only for partial breastfeeding, sometimes only once or twice at night. The typical female migrant farm worker who works long days in the fields is fortunate to have proper toilet facilities - and the opportunity to use them - much less have the chance to express breast milk for her child. These migrant women do recognize the benefits of breastfeeding and continue to do so, but often times only once or twice in the late evening hours. These are "breastfed" infants that usually require a full formula package to meet their daily needs. Yet, these partially breastfeeding mothers should be recognized and

applauded for continuing to breastfeed their babies, despite barriers, and should be able to

receive a breastfeeding package for themselves. Therefore, I recommend you give the States the option of having greater variety of larger formula packages for partially breastfed infants so women do not have to make the choice between receiving enough formula for their baby or the supplemental food for themselves.

As for the rest of the proposed food package changes:

I encourage USDA to provide the full fruit and vegetable benefit as recommended by the Institute of Medicine. I support the promotion of whole grains in the revised food packages, and limiting sugars in WIC cereals.

I recommend that USDA require that all milk in the food packages for children ages 2 to 3 years be 2% or lower fat and that milk from 3-4 years of age be only low-fat (1%) or fat-free to help reduce saturated fat intake and harm to children's hearts and arteries. Women packages should allow only 2% or lower fat milk.

I support the proposed rule regarding allowing soy "milk" and calcium-set tofu as substitutes for milk-- but without requiring a doctor's prescription.

I support the proposed reductions in the quantities of cheese and eggs in the food packages to decrease saturated fat and cholesterol intake, and urge USDA to require all cheese offered in the food packages to be light, reduced, or low in fat.

Overall, I strongly support USDA's proposed rule for updating the WIC food packages, and urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Jeanne Harding 2335 Richard Saginaw, Michigan 48603

Sent: Sunday, November 05, 2006 11:03 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Lucia Kaiser

EMAIL:

llkaiser@ucdavis.edu

CITY:

Davis

STATE:

CA

ORGANIZATION: UC Davis Department of Nutrition

I am very pleased to see that the proposed rules have adopted most of the IOM's

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 05, 2006

Time:

11:03:12 PM

COMMENTS:

recommendations. In particular, I strongly support allowing a wide variety of fruits and vegetables; adding whole grains and whole grain cereals; limiting the fat content of milk for participants over two yrs. of age; reducing the amount of juice; reducing the amount of milk and cheese; adding tofu and soy milki; disallowing the provision of formula to nursing newborns; and limiting the amount of formula provided to partially breastfed infants. Some suggestions regarding changes to consider include the following: 1) Add \$2 more in fruit and vegetables to the exclusively breastfeeding women's package, bringing the total to \$10. Also, consider allowing yogurt for these participants as well. The IOM report had recommended \$10 for all women but if that is not cost neutral, then at least it ought to be considered for the exclusively breastfeeding women. Although the revised package achieve greater equity in value for the breastfeeding and nonbreastfeeding women, the exclusively breastfeeding pair still does not receive the same value in WIC coupons. To provide greater incentive to fully breastfeed, value of the eclusively breast-feedings women's package can be increased by the additional \$2 of

- produce and the yogurt. 2) I strongly agree with pilot testing the new packages. However, the proposed rule is not clear regarding the conditions. Pilot testing of the new partially breastfed infant package should be done only where all the other package changes are fully in place. It should also be made clear how the partially breastfed in tants are to be fed in the interim. Presumably, they would be able to get the new package in some form (an individually tailored package I, II or III.)
- 3) If the option of states to petition for changes is removed, then a clear timeline for periodic review of the packages should be established.
- 4) I agree with the rule that vendors must be able to provide at least 2 different varieties each of fruit and vegetables. Some provision is also needed to ensure acceptable quality, as well as variety.

Sent: Sunday, November 05, 2006 11:54 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Tricia Michels, MD

EMAIL:

tmichels@gmail.com

CITY:

San Francisco

STATE:

CA

ORGANIZATION: University of California, San Francisco Pediatric Resident; San

Francisco General Hospital Pediatric Resident CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 05, 2006

Time:

11:53:34 AM

COMMENTS:

Thank you for considering the new rules. In my role as a primary care pediatrician, I am astounded when families come in giving unhealthy food to their infants and children and they assume it is healthy because it comes from WIC. While we counsel families on an individual basis regarding healthy food choices for their growing children, WIC needs to take a major leadership role in helping make these choices accessible to our families.

From: Gloria [kwpierson@psnw.com]

Sent: Sunday, November 05, 2006 11:00 AM

To: WICHQ-SFPD

Subject: Support for WIC Food Package Change

Breastfeeding. I support the stronger incentives for continued breastfeeding by providing less formula to partially breastfed infants and providing additional quantities/types of food for breastfeeding mothers. These changes will promote and support long term successful breastfeeding, which is a key early step in obesity prevention.

I believe that we should support women in their decision / choice to breastfeed by giving breastfeeding support rather than immediately giving formula which in fact undermines their confidence in their ability to breastfeed. Breastfeeding support is crucial in the first week post partum. More money should be spent on support rather than formula. Breastfeed babies self regulate their intake thus preventing obesity right from the start.

Gloria Pierson, RN, IBCLC

From: M. Jane Heinig [mjheinig@ucdavis.edu] Sent: Sunday, November 05, 2006 3:41 PM

To: WICHQ-SFPD

Subject: Comments on Docket ID Number 0584-AD77

11/5/2006

Ms. Patricia N. Daniels, Director
Supplemental Food Programs Division
Food and Nutrition Services
U.S. Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, Virginia 22302

RE: Comments on WIC Food Packages Proposed Rule, Docket ID Number 0584-AD77.

Dear Ms. Daniels,

Thank you for the opportunity to provide comments on the USDA's proposed regulations that substantially revise the WIC Food Packages. As a long time researcher in the field of infant feeding, I am pleased to support these long-awaited reforms. I commend the Department for proposing important changes to WIC that are consistent with the 2005 Dietary Guidelines for Americans and the American Academy of Pediatrics infant feeding recommendations. I believe that, when implemented, these reforms will greatly strengthen the WIC program's ability to improve the nutrition and health status of participating families. Given the global concerns about the epidemic of childhood obesity, it is everyone's best interest to improve the diets of even our youngest children.

I strongly support the provision of cash-value vouchers for families to purchase fruits and vegetables. For many parents, this assistance will be the first step on the path toward providing healthier foods for their children. I hope that as funding becomes available, the cash value of these vouchers may be increased to match the amounts recommended in the IOM report "WIC Food Packages: Time for a Change." To remain cost neutral, I understand it was necessary to reduced the amounts of milk, cheese, eggs and juice. These reductions are highly appropriate and better in line with the current dietary recommendations for young children.

Perhaps one of the boldest recommendations offered by the IOM report was the reduction of formula given to partially breastfed infants and providing additional quantities/types of food for breastfeeding mothers. I believe strongly that this recommendation is one of the most significant. For anyone who understands physiology of lactation, it is clear that the early establishment of the mother's milk supply is the key to extending breastfeeding duration. Among mothers who choose to mix-feed their infants with both breast milk and formula, they need to be educated and empowered to establish their milk supply first and balance supplementation with feeds at the breast. Early and excessive use of formula

often results in unintended weaning and disappointment. By providing less formula, WIC may fully support these mothers in their decision to partially breastfeed.

We look forward to the implementation of these excellent food package improvements. These changes will be a major policy lever to improve community food security, address the obesity epidemic, and help low-income families make healthier food choices. In the last five years, we've seen increasing awareness of the relationship between diet and health among parents, policy-makers, and community leaders. This awareness and the growing concern about child obesity have resulted in a climate ripe for change. Through prompt and full implementation of the proposed regulations, USDA will become a role-model for the nation in ensuring access to a healthier lifestyle for all families.

Sincerely,

M Jane Heinig
Executive Director, UCD Human Lactation Center
Editor-in-Chief, Journal of Human Lactation

From: Daniel Uncles [danieluncles@gmail.com] Sent: Sunday, November 05, 2006 5:55 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

I support allowing more fruits and vegetables to be bought with WIC funds. These foods are most lacking in peoples diets, especially low income peoples diets. I know in my experience as a child growing up in a low income household it was harder to keep fresh fruit and vegetables in stock at the home.

As a holistic health and nutrition counselor i support more vegetables and less dairy and eggs in the diet of all Americans. We will all be healthier if we increase Veggies and fruits and decrease Dairy and Eggs.

Thanks,

Dan Uncles
Holistic Health Counselor
American Association of Drugless Practitioners Newark, Delaware

www.NutritionSpirit.com

From: no-reply@erulemaking.net

Sent: Monday, November 06, 2006 2:19 PM

To: CNDPROPOSAL Subject: Public Submission

Public Comments on Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages:————

Title: Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages FR Document Number: 06-06627 Legacy RIN:

0584-AD77

Publish Date: 08/07/2006 00:00:00

First Name: Arly Last Name: Helm

Mailing Address: 151 Celesta Dr

City: Grass Valley Country: United States State or Province: CA Postal Code: 95945 Organization Name:

General Comment: ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels:

I would like to voice my strong support regarding the proposed changes to the WIC food package. While not perfect, the changes would represent a huge step forward in bringing the WIC foods into line with best dietary practices at this time, by decreasing juice in favor of fresh fruit and vegetables, by emphasizing whole grains, and by postponing solid foods until the recommended lowest risk age of six months. As a lactation consultant/degreed nutritionist dedicated to improving the health of California's infants (and California's future), I am particularly in favor of the following changes:

The packages for breastfeeding infant-mother pairs are revised to provide stronger incentives for continued breastfeeding, including providing less formula to partially breastfeed infants than current packages, and providing additional quantities/types of food for breastfeeding mothers. For older infants, the proposal delays the introduction of complementary foods, consistent with AAP, from four [now being used] to six months of age [new] and modifies [decreases] formula amounts. Infant foods are added and juice eliminated in the packages for older infants in order to promote healthy dietary patterns. Yours,

Arly Helm, BA, MS, Nutrition and Food Science; IBCLC since 1994; Broadcaster, KVMR-FM 89.5 Nevada City

Sent: Monday, November 06, 2006 9:35 AM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Kimberly Cantor

EMAIL:

kcantor@awhonn.org

CITY:

Washington

STATE:

DC

CATEGORY: Other

OtherCategory: Health Care Provider Trade Association

Date:

November 06, 2006

Time:

09:34:47 AM

COMMENTS:

November 6, 2006

Patricia N. Daniels

Director, Supplemental Food Programs Division Food and Nutrition Service - USDA 3101 Park Center Drive

ORGANIZATION: Association of Women's Health, Obstetric and Neonatal Nurses

Room 528

Alexandria, VA 22302

Docket ID Number: 0584-AD77-WIC Food Packages Rule

Dear Ms. Daniels:

The Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) supports for the proposed rule to change the Special Supplemental Nutrition Program for Women, Infants and Children food packages. AWHONN is a national membership organization of 22,000 nurses, and it is our mission to promote the health and well-being of women and newborns. AWHONN members are staff nurses, nurse practitioners, certified nurse-midwives, and clinical nurse specialists who work in hospitals, physicians' offices, universities, and community clinics throughout the United States. Our members care for women and newborns each and everyday, and the proposed changes to WIC food packages will greatly benefit vulnerable mothers and children.

The proposed rule makes major changes to the current WIC food packages. We are pleased that the proposed rule closely reflects the science-based recommendations of the Institute of Medicine published in their April 2005 report entitled, WIC Food Packages: Time for a Change. In addition, the changes reflected in the proposed rule are also consistent with the 2005 Dietary Guidelines for Americans and national nutrition

guidance including those from the American Academy of Pediatrics, which is a major step forward towards improving the overall nutritional health and well-being of WIC-mothers and children. In addition, AWHONN applauds the incorporation of ethnically and culturally sensitive selections within food packages.

The proposed food packages will provide greater amounts of all of the priority nutrients currently identified as needed by the WIC population. The new packages will supply a reliable and culturally acceptable source of supplemental nutritious foods as well as promote and support exclusive breastfeeding. Equally important, the proposals will provide WIC professionals with the necessary tools to reinforce the nutrition education messages and promote healthier food choices.

Changes in the proposed rule are a significant, positive step forward and will improve the overall health of WIC mothers and children by contributing to reductions in obesity and other diet-related chronic diseases. AWHONN's comments will apply for the most part to the revisions that support the stated goal to "better promote and support the establishment of successful long-term breastfeeding." AWHONN supports breastfeeding as the optimal method of infant feeding. AWHONN believes that pregnant women should be encouraged to breastfeed and receive instruction and support from the entire health care team to successfully initiate and sustain breastfeeding. Discussions concerning breastfeeding should begin during the prenatal period and continue through the first year of life.

To establish and maintain exclusive breastfeeding for the first month after birth will require more than enhanced maternal food packages. Mothers need both prenatal and postpartum face-to-face time with trained breastfeeding counselors. For situations beyond the scope of peer counselors, mothers need access to lactation consultants with the IBCLC credential. While some WIC agencies dedicate large amounts of time to breastfeeding, many agencies have no peer counselors, engage in sporadic breastfeeding education, lack coordinated follow-up, and those supposed to function as the breastfeeding coordinators or breastfeeding resource persons are assigned to clerical duties or to certifying and re-certifying mothers. Agencies with better initiation and duration statistics typically offer breastfeeding classes, one-on-one prenatal counseling, telephone contacts, on-call services, and hospital visits. Standards should be established for staff-to-participant ratios of breastfeeding peer counselors and lactation consultants for all WIC agencies. There should be minimum continuing education requirements for all staff delivering lactation care and services, and some food funds should be targeted to support higher cost nutrition services such as home or hospital breastfeeding support.

In addition, AWHONN recommends there be no test period for the partially breastfeeding food packages for women and infants. We believe that deletion of the pilot phase would speed the implementation of these packages. For women who declare themselves as breastfeeding moms, we urge that, consistent with the IOM recommendation, states be given the option to establish criteria under which infant formula may be provided in the first month. To further support breastfeeding, AWHONN urges that the cash-value vouchers for fruits and vegetables for fully

breastfeeding women be increased to \$10. We believe that this change would be cost-neutral and a significant incentive for breastfeeding mothers.

AWHONN supports policies that encourage women of childbearing age to consume at least 400 micrograms of synthetic folic acid every day. The consumption of folic acid has shown to prevention of significant birth defects such as neural tube defects (NTDs) that are among the most serious, common and preventable birth defects. Up to 70 percent of NTDs can be prevented by consuming 400 micrograms of folic acid every day, beginning before pregnancy, from good sources including a daily multivitamin supplement. This recommendation is supported by the Institute of Medicine, which advised that all women of childbearing age take 400 micrograms of synthetic folic acid daily, from supplements and/or fortified foods. AWHONN urges the USDA to consider the inclusion of specific foods (natural and fortified) that provide women with the recommend daily allowance of folic acid. In addition, AWHONN recommends including educational guidance regarding the importance of consuming folic acid with counseling services offered under WIC.

WIC is our nation's premier public health nutrition program. The long-term benefits of providing participants with fruits and vegetables, lower fat dairy products and whole grains, as well as additional incentives for fully breastfeeding women will greatly aid WIC in improving the life-long health of our most vulnerable women, infants and children. AWHONN urges publication of a final rule by Spring 2007 to assure timely implementation of the rule's invaluable changes.

Sincerely,

Melinda M. Ray Director, Public Affairs From: Barbara Baron [bbaron@adadc.com] Sent: Monday, November 06, 2006 4:25 PM

To: WICHQ-SFPD

Subject: Proposed WIC Guidelines

As a Registered Dietitian with the American Dairy Association and Dairy Council, Inc. I would like to offer these comments regarding the dairy recommendations in the proposed WIC guidelines. The 2005 Dietary Guidelines for Americans (DGA) recommended that most people increase consumption of low-fat and non-fat dairy, and the milk group supplies several of the DGA's "nutrients of concern," which are low in most Americans' diet. It is my understanding that the proposed guidelines are meant to update and bring the WIC food packages in line with U.S. Dietary Guidelines for America and while the proposed rules do include fruits and vegetables there are short falls regarding dairy food recommendations.

Among the proposed changes in the package are recommendations that would reduce the amount of milk in the food packages for women and children. The fluid milk allocation would be reduced in the children's package from 24 to 16 quarts per month. Reductions would vary in the three packages for women, falling from 24 to 16 quarts/month for postpartum, non-breastfeeding women; from 28 to 22 quarts/month for pregnant and partially breastfeeding women; and from 28 to 24 quarts/month for fully breastfeeding women. For breastfeeding women, this translates into about 3 cups milk/day and for non-breastfeeding women and children, about 2 cups milk/day --- less than what the US Dietary Guidelines (DGA) recommend.

It is noted that the amount of milk is reduced noting the importance of reducing saturated fat, total fat and cholesterol, yet this can be done by simply providing low fat and non fat milk rather than reducing the amount of milk in the food package.

The proposed rule emphasized soy beverage as a substitute for individuals with lactose intolerance, and allows full substitutability of soy beverage for milk. This approach is contrary to the advice of the DGA, which recommends dairy foods such as hard cheese, yogurt or lactose reduced/free milk as the first choice for individuals with lactose intolerance. Soy beverages are not nutritionally equivalent to milk. Despite establishing fortification levels for select nutrients that must be added to soy beverage, fortification in the proposed rule does not address the issues of solids settling to the bottom of soy beverage cartons that was identified in a published scientific paper by Dr Robert Heaney. reference: Heaney, R.P.et al. Not all calcium fortified beverages are equal. Nutrition Today. 2005 40(1):39-44. This settling effect could result in WIC recipients consuming a portion of soy beverage that does not contain nutrients at the required USDA level.

In addition, two reports published in 2006 by the American Academy of Pediatrics (AAP), including "Optimizing Bone Health and Calcium Intakes of Infants, Children, and Adolescents" and "Lactose Intolerance in Infants, Children and Adolescents," emphasize

the importance of adequate dairy intake to meet calcium recommendations, including for children with lactose intolerance. AAP recommends 3 servings of low-fat milk, cheese or yogurt to help children meet calcium requirements, and provides strategies for dairy consumption for those with lactose intolerance to ensure nutrient needs are met.

Soy-based beverage and calcium-set tofu would be authorized in the proposed guidelines as substitutes for milk with proper medical documentation. For children, in accordance with the DGA, USDA highlights the importance of milk in the diets of children, especially for bone health, allowing soy beverage only with a documented medical need. By requiring medical documentation, USDA seems to acknowledge that soy beverage is not equivalent nutritionally.

USDA's decision to reject yogurt as a substitute for milk in the food packages of women and children cannot be supported on nutritional grounds. Yogurt is an excellent source of calcium and protein, a good source of potassium, too. Recommended by Institutes of Medicine (IOM), yogurt is a nutrient rich dairy food that is well tolerated by those sensitive to lactose and fits into a variety of food patterns. The decision was an economic one, and unfortunately does not allow for the substitution of yogurt for milk. The IOM report says the highest priority nutrients to increase in the diets of women of reproductive age include calcium, magnesium and potassium. Other priority nutrients targeted for increased intake include vitamin A and vitamin D. Milk contains all these nutrients, and the 2005 Dietary Guidelines increase the milk servings based on milk as an important contributor of potassium.

Rather than strictly reducing the substitutability of cheese, USDA could allow WIC recipients to substitute a mix of full fat and reduced fat cheeses, thereby providing choice to participants especially the lactose intolerant. Cheese is a low-lactose food, and it is easy to digest for lactose maldigesters. In addition, it is popular across the majority of cultural groups served by the WIC program, and can provide key nutrients for those who choose not to drink milk, therefore why reduce cheese?

Tofu is not nutritionally equivalent to milk. While calcium-set tofu contains several of the micronutrients found in milk, the nutrient content of tofu varies considerably among different calcium-set tofu preparations. Tofu may be more appropriate as a protein substitute rather than a milk substitute. In addition, although tofu may fit naturally into some food patterns, it is not widely used in Hispanics and African American food patterns.

Thank you for taking these comments under consideration.

Barbara R Baron, MS,RD,CDN Director Health Professional Communications American Dairy Association & Dairy Council, Inc 219 South West Street Suite 100 Syracuse, New York 13202 Phone: 732-566-8057 or 315-472-9143 Fax: 732-566-8046

Cell: -315-491-3913

Email: Bbaron@adadc.com

From: Beggs, Lilli W. [BeggsL@sutterhealth.org] Sent: Monday, November 06, 2006 5:30 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

I support the stronger incentives for continued breastfeeding by providing less formula to partially breastfeeding infants and by providing additional quantities of fruits, vegetables and whole grain foods (including soy products) for breastfeedigng mothers. I also support the inclusion of lower fat dairy products. These changes will promote and support long term successful breastfeeding, which is a key early step in obesity prevention.

All of the proposed changes will strongly reinforce WIC nutrition education messages, as well as address the cultural food preferences among California's diverse population.

I urge the USDA to conduct its analysis promptly and efficiently so that a Final Rule can be published in the next few months so that WIC families do not have to wait any longer for better WIC foods.

Thank you for addressing comments.

Sincerely,
Lilian Beggs RN IBCLC
Perinatal Nurse, Director Sutter Lactation Center

From: Carole Boswell [cboswell@maternal.org] Sent: Monday, November 06, 2006 4:50 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

To Whom it May Concern:

I am in full support of WIC food package changes. I have been a dietitian with WIC for about 15 years. Our clients are ready for a change. They would like more choices, which the proposed changes would allow. The state of Iowa has the Farmers Market program. Our clients love it! When asked if they would like something like this year round at their local grocery store, they overwhelmingly say, "Yes!"

I encourage you to take notice of suggestions from the Iowa Department of Public Health WIC staff.

THANK YOU for all efforts to make WIC even better!

Carole Boswell, R.D., L.D.

Docket ID Number 0584-AD77, WIC Food Packages RuleFrom: Cochran, Janice

[jcochran@buffalo.edu]

Sent: Monday, November 06, 2006 3:24 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Hello!

Please strengthen the WIC program by including the full benefit recommended by the Institute of Medicine for fruits and vegetables, whole grains and soy products.

Thank you!

Janice Cochran, MS, RD
Dietitian/Nutritionist
Wellness Education Services
114 Student Union
645-2837 x 4
jcochran@buffalo.edu

HP-765

From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 11:43 AM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Helen E. Costello

EMAIL:

hcostell@comcast.net

CITY:

Concord

STATE:

NH

ORGANIZATION: Nutrition Crossroads CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

11:43:29 AM

COMMENTS:

1 am in support of the proposed changes in the WIC food package as recommended by the Institute of Medicine's report on the topic. I would strongly urge Congress to release funds to include the fruits and vegetables that are needed to maintain good health. My work with farmers' markets has provided insights into the direct benefits low income families derive from having access to fresh fruits and vegetables. Of course, encouraging WIC families to use more fruits and vegetables of any kind is a smart upfront investment in the health and nutrition of children and mothers.

I am pleased to see some sensitivity to cultural foods in the recommendations and very disappointed that yogurt is still not an option. Yogurts with low sugar content are a great way to encourage people to use more fruit by making smoothies or adding fruit to yogurt as mael, snack and dessert options. Please consider a relatively small investment in the health of children upfront by recommending appropriatioins to include adequately funds for recommended levels of fruit and vegetable intake.

From: Conleth.Crotser@health-partners.org Sent: Monday, November 06, 2006 1:37 PM

To: WICHQ-SFPD

Subject: DocketID Number 0584-AD77, WIC Food Packges Rule

Hello,

I work with a largely Hispanic and African-American population and have worked with several Native American populations in the past. Most of my patients cannot digest milk, therefore do not like it and will not drink it, except possibly with lots of extra sugar such as in chocolate flavoring or sweetened cereal (which adds to the obesity epidemic in the country). Trying to convince them to take small, increasing amounts of milk, or milk with food that is not overly sweetened is ridiculous and hopeless. I try constantly to get them to try lactose reduced/free milk, yogurt, or soy milk. However, none of those products are on WIC so most of those families cannot (or believe they cannot) afford them. The milk goes unused, or used only with too much sugar, and none of the family members get enough calcium. Please make sure those products are part of the WIC package so that families like the ones I see will take adequate calcium, without nausea, bloating or other symptoms of lactose intolerance. Thanks.

Conleth M. C. Crotser MD, MPH Lorain County Health and Dentistry 1800 Livingston Ave. Lorain, OH 44052 440-233-0166

Sent: Monday, November 06, 2006 2:23 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Peter Dawson, M.D.

EMAIL:

Peter_Dawson1@yahoo.com

CITY:

Boulder

STATE:

Colorado

ORGANIZATION: People's Clinic

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

02:22:55 PM

COMMENTS:

I like the changes. Specifically, I hope you reduce the allotment of juice.

Sent: Monday, November 06, 2006 11:24 PM

To: WICHQ-SFPD

Subject: Revisionsto WICFoodPackages-Proposed Rule

NAME: Mary V Dye

EMAIL: maryvdd@gmail.com

CITY: New York
STATE: New Yorl

ORGANIZATION: Head Start

CATEGORY: Other

OtherCategory: Private Nutrition Consultant

Date: November 06, 2006

Time: 11:23:59 PM

COMMENTS:

I am a Registered Dietician working with the New York City Head Start population as a nutrition consultant, and while I am not offering comment on behalf of these organizations I am an active member of the American Dietetic Association, Society for Nutrition Education, Community Food Security Coalition, New York City Nutrition Education Network. I support USDA's proposed new WIC food packages rule because it will:

- improve the health and nutritional quality of the foods offered
- provide incentives for breastfeeding
- incorporate whole grains and more fruits and vegetables while reducing juice
- increase healthful choices for the women, infants and children in the WIC program
- bring the choices in line with the current Dietary Guidelines for Americans and the current infant feeding practice guidelines of the American Academy of Pediatrics (this is important to health and nutrition education)
- restrict added sugars, starches, or salt in infant food
- reduce fat content especially saturated fat.

Sent: Monday, November 06, 2006 10:10 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Allison Ehalt EMAIL: alehalt@iupui.edu

CITY: Indianapolis STATE: Indiana ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 10:09:37 AM

COMMENTS:

The amount of milk and cheese that participants are receiving should not be decreased-especially for infants and children. This is a time when children are rapidly growing and need the most calcium and vitamin D in order to maintain bone integrity. Also, yogurt should be included- any way for women and children to get calcium is beneficial to these populations of people.

From: wellness [denice@wellnesspress.com] Sent: Monday, November 06, 2006 10:56 AM

To: W1CHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Importance: High

TO: USDA

As an expert in disease prevention through lifestyle changes, I have personally helped thousands of people to improve their weight, better control diabetes and decrease risk factors associated with high blood pressure, high cholesterol and heart disease. The low income population should have easier access to more healthful food choices. Early in my career, I worked in the wealthiest county in Pennsylvania that had the highest infant mortality rate. I worked alongside the WIC nutritionist, who could only see the patients who were already malnourished. My efforts in the pre-natal clinic - setting up a nutritional assessment program and making nutrition counseling optional - resulted in patients staying for 4 hours - the clinic was only open for two. Prevention and treatment through lifestyle changes, like changing food choices, became the focus of my career. Pregnant and new mothers are receptive to making changes that can improve the lives of their children.

I strongly supporting USDA's proposed rule and encourage the USDA to strengthen its proposal by including the full benefit recommended by the Institute of Medicine for fruits and vegetables, whole grains and soy products. These foods are critical to improving the health of our nation.

Thank you for considering this important change.

Denice Ferko-Adams, MPH, RD, LDN
Worksite Wellness Management Consultant
Wellness Press, President
Phone - 610-746-5986 Website - www.wellnesspress.com Professional Issues Delegate,
American Dietetic Association

Sent: Monday, November 06, 2006 11:05 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Sharon Feucht, MA, RD, CD

EMAIL: safeucht@att.net

CITY: Renton

STATE: Washington

ORGANIZATION: Personal comments from a pediatric registered dietitian who works

with families who access WIC

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 11:05:01 PM

COMMENTS:

I write in support for the proposed rule changes overall to the Special Supplemental Nutrition Program for women, infants and children. I am delighted that USDA took so many of the Institute of Medicine recommendations.

The inclusion of fresh fruits and vegetables is commendable and the allowance of other grains is important for the clients that I see. The additions to calcium sources is another addition important for so many who cannot tolerate the current calcium sources.

While I do believe iron is important for breastfed babies I would suggest you have a gradual addition of infant food meat and not start at 6 months with 31 jars. By eight months of age that might be more reasonable. This might allow extra funds for more fruits and vegetables for breastfeeding women. I concur with the fruit/vegetable amount for infants.

Please implement the final rule on these changes as soon as possible to support continued health for women, infants and children. This is a very exciting time for WIC. I am so pleased with these proposed rule changes as I work with families and their children.

10-31-06 email from Shari Bebeau [sbebeau@umn.edu] Date October 31, 2006

Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels:

I am in strong support of the proposed changes to the WIC food packages, which will allow for food vouchers to buy fruits and vegetables. I am a student at the University of Minnesota School of Public Health working toward a Masters' degree in Public Health Nutrition. As a student, I am continually finding literature that shows the health benefits of fruits and vegetables in the diet. I truly believe the WIC participants are a population that is most amenable to changing their diets for the better. This is also a population that has increased barriers to buying fruits and vegetables. I congratulate the Food and Nutrition Service for seeking change in their food packages that will make a positive and lasting impact on the WIC program participant's health and risk of future chronic disease.

Recent studies point out the importance of a diet rich in fruits and vegetables. In a study by Corbo, et al published in 2005 in the Epidemiologia e Prevenzione, the results showed children had a lower risk of asthma when they consumed fruits and vegetables. Another article from the Department of Nutrition and Food Services at the University of Vermont, published in the Proceedings of the Nutrition Society, May 2000, stresses the importance of children eating more fruits and vegetables to help them develop healthful eating habits for a lifetime. Another study by Williams in 1995 in the Journal of the American Dietetic Association discusses the importance of fruits and vegetables in young children to promote normal laxation and to prevent chronic disease.

Please allow WIC participants freedom to choose a wide variety of fruits and vegetables, including canned, dried, frozen or fresh. Access issues often dictate what is available to poor people living far from the large grocery stores. Often, the corner grocer in the low-income neighborhood is limited to canned vegetables and fruit.

I also support nutrition education and activities that can really provide opportunities to try new fruits and vegetables. Offering samples of fruits and vegetables and demonstrations on how to prepare them goes a long way toward breaking the knowledge barrier that limits variety in fruits and vegetables. This type of hands on nutrition education may increase the variety of fruits and vegetables chosen by WIC participants. Please increase resources that will enable WIC clinics to do this type of education.

Again, I congratulate the Food and Nutrition Service for developing this proposal for the WIC food package change.

Sincerely, Shari Bebeau, RD

—HP-779---

From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 9:36 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Maria Fill

EMAIL:

waterfall15@sbcglobal.net

CITY:

glastonbury

STATE:

ct

ORGANIZATION: RD

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

09:36:20 AM

COMMENTS:

the addition of fresh fruit and vegetables would be highly recommended. Some organic would be beneficial also. Just because they are poor, does not mean they should get only GMO foods.

thank you,

Maria

Sent: Monday, November 06, 2006 11:16 AM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Mary Jo Forbord

EMAIL: mforbord@sfa-mn.org

CITY: Starbuck STATE: MN ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 11:15:32 AM

COMMENTS:

I strongly support the proposed rule changes. I particularly want to emphasize that WIC program participants should be encouraged to purchase fresh fruits and vegetables at farmers' markets. The revisions should be further strenghtened by (a) incorporating the Institute of Medicine's full recommendations for the amount of fruits and vegetables necessary for a nutritionally adequate children's food package, and (b) coordinating the proposed new, expanded use of the WIC "cash-value food instrument" with the WIC Farmers Market Nutrition Program (FMNP), including automatically allowing WIC FMNP-qualified markets and farmers to redeem the new WIC cash-value food instrument.

Sent: Monday, November 06, 2006 4:25 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Rachel Foxx

EMAIL: mamafoxx@gmail.com

CITY: Burlington

STATE: VT ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 04:25:24 PM

COMMENTS:

Thank you for modifying the food package to WIC participants, it has been a long time since it's been done, and I appreciate the work that was put into the proposed changes. I would like to make a few comments about the proposed changes as a nurse as well as the mother of a child who receives WIC foods.

I would like to encourage the additions of fruits and vegetables, beans, peas and legumes, and whole grain breads, brown rice and tortillas. These are important changes and additions to women and children's health. However I question and disagree with the reduction in the quantity of eggs. These are very important pieces to people's nutrition and should be encouraged and not decreased. I also strongly disagree with the elimination of whole milk for paticipants 2 and older. Whole milk is important for children who get enough exercise and other nutritive foods and I strongly believe that you should continue to offer the choice to the parents of all children. I understand that obesity is a huge issue in our country today, however it's education and not elimination of wholesome foods that is needed. Milk with lower fat content has been processed more than whole milk. My daughter, who is very healthy and not at all overwieght is only allowed to drink whole milk because I don't want her to consume products that are over processed.

The one part of the WIC package that I don't see any revisions to are the types of cereals that are offered. I understand that WIC cereals have to meet certain criteria when it comes to low sugar content and high fiber content, however there are no cereals offered at this time that are sugar free or fruit juice sweetened. For many months I decided not to receive any of the cereals that were offered because they all have sugar in them. My daughter often eats oatmeal for breakfast, and even the WIC oatmeal has sugar in it. Since it is a proven fact that breakfast is the most important meal of the day, and children need to have a nutritious breakfast in order to concentrate and interact better during the

day, I don't feed my daughter sugar in the morning. She gets the occasional sugary snack either after lunch or after dinner, but definitely not at breakfast! Please look into offering some cereal choices that have no sugar.

I would like to commend you for the decision, or recommendation, to eliminate infant formula supplements for breastfed infants under one month of age. It is so important for the breastfeeding relationship between a mother and her infant to get a good start and formula gets in the way of that. Thank you for making that change!

Thank you for your time and effort in making these revisions to the WIC package, and for the opportunity to comment on them.

Sincerely,

Rachel Foxx, LPN Burlington, VT From: kittie g.b. frantz [frantz@usc.edu] Sent: Monday, November 06, 2006 4:27 PM

To: WICHQ-SFPD

Subject: USDA WIC FOOD PACKAGE PROPOSAL

Dear Ms. Daniels,

I have read the USDA WIC FOOD PACKAGE proposed changes with enthusiasm and some concerns. I am a pediatric nurse practitioner who is currently Coordinator of Lactation Education and Clinical Instructor in Pediatrics at Los Angeles County University of Southern California Keck School of Medicine. I have been a nurse practitioner for 35 years. I also served with Ursula Singleton on the United States Breastfeeding Committee since it's inception.

I would like the oportunity to voice my own expert opinions on the proposal.

- 1. Hooray for fresh fruits and vegetables and supporting local small farmers markets! This is so needed to fight obesity and teach children good future eating habits.
- 2. I was chagrinned to see that only jar pureed baby foods were offered to infants over 6 months of age. Hooray that the proposal brings WIC in line with the AAP, surgeon general reccommendation, WHO and others to not start solid food until 6 months. A six month old infant is ready for mashed fruit and mashed cooked vegetables. WHY ARE WE GIVING THEM JAR BABY FOOD? Why not continue to support the fresh fruit and vegetables for these infants? Jar pureed food is only needed for infants under 6 months of age and we do not reccommend giving solid food to this age group anymore. If you have to give them jarred pureed infant food then make a stipulation that it has to be 100% single fruit or 100% single vegetable vegetable or 100% single meat in one jar. The mixed food jars are often full of starch or sugar and contribute to obesity.
- 3.Please NO JUICE! No baby or child on the planet needs juice as a nutritional requirement. Show me the study that says that they do. There is none. It rots teeth, prevents children from liking water, and promotes obesity. Fresh fruit and water are the best. (There I go with the fresh fruit again.)
- 4. My daughter married an Army sargeant and was elegible for WIC. For a time the family lived with me and I saw first hand what was given to them. YOU CANNOT EAT ALL OF THAT CHEESE! I never saw so much. My thrifty daughter felt she had to find ways to use it. Cut down on the cheese please. That really contributes to obesity for sure. And while you are considering dairy please offer lower fat milk. That was another item that my grandkids did not need was whole milk in such abundance.
- 5. Since I have promoted breastfeeding all of my career, I have found myself trying to convince Mom's that if baby nurses a lot, the milk will come. ...and it does indeed. The

HHS focus group study on why families choose or don't choose breastfeeding showed that these families saw formula as "just as good" as human milk or "made special for babies that has extra vitamins". So what are they doing? Breastfeeding and then topping off with "just as good" or the "special stuff for babies". The contributes to obesity. Please cut down on the formula for families wanting to use both formula and breastfeeding.

Obesity in this country began to soar after the 1970's. When did WIC begin? How much has WIC contributed to this with the abundance of cheese, whole milk, sugary cereals and juice????

Thank you for the oportunity to offer my own opinions on the package proposals,

Kittie Frantz, RN, CPNP

Sent: Monday, November 06, 2006 8:13 PM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Ellen J. Fried

EMAIL:

ejf208@nyu.edu

CITY:

New Rochelle

STATE:

NY

ORGANIZATION:

CATEGORY: Other

OtherCategory: Academic

Date:

November 06, 2006

Time:

08:12:46 PM

COMMENTS:

Ellen J. Fried, JD, MA 534 Forest Avenue, New Rochelle, NY 10804 (914) 833-5057 email: ejf208@nyu.edu

Patricia N. Daniels
Director
Supplemental Food Programs Division
Food and Nutrition Service, U.S. Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, VA 22302

RE: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels:

I am an attorney and assistant adjunct professor at New York University's Department of Nutrition, Food Studies, and Public Health. Although not offering comment on behalf of this organization, I am the chair of the public policy working group of the New York City Nutrition Education Network (NYCNEN). I wish to state my support for USDA's proposed new WIC food packages because it updates the WIC food packages to reflect the Dietary Guidelines and current nutritional science by adding fruits, vegetables, whole grain bread, corn tortillas, and the option of soymilk and tofu, and moving to low-fat milk and whole grain cereals.

After working at farmers' markets for the past few months where WIC farmers' market coupons were used extensively, I want to convey the positive impact of this benefit and urge its continued use. Mothers and father shopping with young children at the farmers'

market provides both an education and important nutrients. It was a delight to see young children savoring peaches in the summer and chomping on apples in the fall – purchased with farmers' market WIC coupons. This is the right step on the road to healthy children and I urge that:

- USDA protect the WIC FMNP from reduction in current funding levels or the establishment of rules, systems, or procedures at the federal or state levels that would adversely affect the operation and effectiveness of the WIC FMNP;
- Require coordination between the proposed WIC fruit and vegetable voucher program and all existing and future federal-state WIC FMNP;
- Specify that farmers and farmers' markets that are currently authorized under state WIC FMNP procedures be automatically eligible for vendor specification under the new fruit and vegetable voucher program. These WIC FMNP farmer and farmers' market authorization procedures should also be applied by states in the future vendor specification process;
- Allow farmers and farmers' markets to participate as seasonal vendors, since most farmers' markets in the country are unable to operate year round. Similarly, farmers' markets need to be exempted from the "WIC only" cost containment requirement and not be required to carry a full range of WIC food package products.
- Provide EBT and or voucher systems that have practical applications for farmers and farmers' market vendors.

Thank you for this opportunity to share my support for the healthy WIC food packages and recommendations to make them stronger still. I hope USDA will act quickly to issue the new food packages.

Sincerely,

Ellen J. Fried

From: KMGans@aol.com

Sent: Monday, November 06, 2006 6:59 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels,

As a Registered Dietitian, I am requesting further development of the dairy recommendations in the proposed WIC guidelines. Milk has been a key building block of the WIC food packages since the program began, and the Institute of Medicine (IOM) identifies milk and other dairy foods for their unique nutrient package supplying priority nutrients. As the USDA is to be commended for updating the WIC food packages with the inclusion of fresh fruits and vegetables to bring them more in line with U.S. Dietary Guidelines for America, the proposed guidelines fall short regarding dairy food recommendations.

Please consider these facts:

- a.. The proposed rule recommends reductions in the milk allowances to essentially age-appropriate serving levels for children (2 cups/day) and most women (3 cups/day) contained in the current guidelines. It is not plausible why there is exception is postpartum non-breastfeeding women whereby their milk allowance would be reduced to a maximum of 2.1 servings/day, nearly one serving less than the 3 servings/day recommended in the Dietary Guidelines for Americans.
- a.. USDA says that reducing the "amount of milk provided through WIC is consistent with recommended limits on saturated fat, total fat and cholesterol consumption put forth in the 2005 Dietary Guidelines for Americans." It is not necessary to reduce the amount of milk in the packages to accomplish that goal. Reducing the allowable fat content in fluid milk, as proposed in the rule, will limit the consumption of saturated fat, total fat and cholesterol via WIC.
- a.. The IOM report says the highest priority nutrients to increase in the diets of women of reproductive age include calcium, magnesium and potassium. Other priority nutrients targeted for increased intake include vitamin A and vitamin D. Milk contains all these nutrients, and the 2005 Dietary Guidelines increase the milk servings based on milk as an important contributor of potassium.
- a.. The proposed rule emphasized soy beverage as a substitute for individuals with lactose intolerance, and allows full substitutability of soy beverage for milk. This approach is contrary to the advice of the DGA, which recommends dairy foods such as hard cheese, yogurt or lactose reduced/free milk as the first choice for individuals with lactose intolerance. Soy beverage is not nutritionally equivalent to milk. Despite establishing fortification levels for select nutrients that must be added to a soy beverage,

fortification in the proposed-rule does not address the issues of solids settling to the bottom of soy beverage cartons that was identified in a published scientific paper by Dr Robert Heaney. Reference: Heaney, R.P., et al. Not all calcium fortified beverages are equal. Nutrition Today. 2005 40(1):39-44. This settling effect could result in WIC recipients consuming a portion of soy beverage that does not contain nutrients at the required USDA level.

- a.. USDA's decision to reject yogurt as a substitute for milk in the food packages of women and children cannot be supported on nutritional grounds. Yogurt is an excellent source of calcium and protein, a good source of potassium, too. Recommended by Institutes of Medicine (IOM) yogurt is a nutrient rich dairy food that is well tolerated by those sensitive to lactose and fits into a variety of food patterns. The decision was an economic one. It is troublesome that USDA would include soy (nutritionally not equal to milk) as a substitute for milk and not allow the substitution of yogurt for milk.
- a.. Rather than strictly reducing the substitutability of cheese, USDA could allow WIC recipients to substitute a mix of full fat and reduced fat cheeses, thereby providing choice to participants and market incentives to encourage the production of more reduced fat cheeses.
- a.. Tofu is not nutritionally equivalent to milk. While calcium-set tofu contains several of the micronutrients found in milk, the nutrient content of tofu varies considerably among different calcium-set tofu preparations. Tofu may be more appropriate as a protein substitute rather than a milk substitute. In addition, although tofu may fit naturally into some food patterns, it is not widely used in Hispanics and African American food patterns.

Please consider these factors before approving the current proposed guidelines.

Sincerely,

Keri

Keri M. Gans, MS, RD, CDN Nutrition Consultant & Speaker President- Elect New York State Dietetic Association "Diet Diva", MNN Ch57, Mondays 9:30pm New York City 212-647-0941 www.kerigansnutrition.com From: Amy Harshman [ames813@yahoo.com] Sent: Monday, November 06, 2006 11:55 AM

To: WICHQ-SFPD

Subject: "Docket ID Number 0584-AD77, WIC Food Packages Rule,

I am writing to voice my support of the proposed rule to WIC. I am a dietitian in the community who works with many WIC clients. It would be of great benefit to this population to have access to soy products and fresh produce. If these products are not included in the package it is most likely that these families will not purchase them on their own, yet they are a very important part of a healthy diet. I am also in favor of decreasing the fruit juices that are offerred to infants at the age of 6 months old. Too many families take this as a license to start giving juice to their children as if it is a "dietary need". I am in favor of replacing this juice with infant fruits and vegetables which provide more nutrition.

It appears that all of the proposed changes to the WIC package are indeed in line with current research that demonstrates what comprises a healthy diet. As a dietitian I am in favor of this.

Thank you in advance for hearing my comments.

Amy Harshman, RD, CD Lifecare Solutions

Sent: Monday, November 06, 2006 6:12 PM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Jennifer Heine

EMAIL:

jmarie7@care2.com

CITY:

Sierra Madre

STATE:

CA

ORGANIZATION: Huntington Hospital and CA Nutrition Network

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

06:12:03 PM

COMMENTS:

Thank you for this opportunity to provide comments on the USDA's proposed regulations to revise the WIC Food Packages. This is a long overdue step in the right direction, which shows people care about the health of our community in need.

I support all of the proposed changes including:

- Vouchers for fruits and vegetables

We encourage 5 a Day, now we can walk the talk.

- Reduce juice and replace it with infant foods at 6 mo Perhaps we can decrease incidence of baby bottle tooth decay, a problem that arises from babies drinking juice.
- Provide soy options

This is very exciting as there are many people who prefer soymilk over cow's milk for reasons ranging to food allergies and religious beliefs. Soymilk and cow's milk both are fortified with necessary nutrients and are equally nutritious.

- Whole grain breads and grains

Whole grains providing fiber can make an impact on reducing obesity by creating satiety and can help diabetics with blood sugar control.

- Lower fat dairy products

Cutting down calories from dairy also can make an impact on the obesity epidemic.

- Packages for breastfeeding mothers

Breastfeeding plays such a crutial role in the health of a person-for-the-rest-of-their-lives.

Doing whatever we can to encourage breastfeeding can only result in greater positive outcomes.

- Include farmers' markets
This helps connect people to their local markets, gives them more shopping variety, teaches positive shopping habits, and creates a smaller ecological footprint.

I look forward to these changes being implemented and being proud of our WIC Program. Thank you!

Jennifer Heine MPH RD Clinical Dietitian and Nutrition Educator Docket ID # 0584-AD77. Support the WIC food package changesFrom: SHAWNA

HELMUTH [SHELMUTH@svmh.com] Sent: Monday, November 06, 2006 5:36 PM

To: WICHQ-SFPD

Subject: Docket ID # 0584-AD77. Support the WIC food package changes

This letter is my endorsement of the WIC food package changes. These changes are imperative to promoting and supporting exclusive breastfeeding and offering healthier food choices to families in the WIC program. Please consider these changes and work towards the health and betterment of our WIC families.

Thank you

Shawna Helmuth RN III, IBCLC

From: DAVID HERRING [herringdavid@hotmail.com]

Sent: Monday, November 06, 2006 5:40 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear USDA,

As a nutritionist working for the USDA -- though these comments are my own and do not represent USDA -- I am writing in support of the proposed WIC changes. The benefits of fruits, vegetables, and whole grains are without question. WIC nutritionists should not have to debate this. The Institute of Medicine and countless research articles support these foods in their minimally processed form. Limiting sugars in WIC children's cereal products is also better for the children and the benefits are backed by science. These issues are clear.

The milk issue, however, is highly contentious, but is primarily political. We at USDA know this all too well. Soy milk should be offered for women who choose to feed their children this calcium and protein source that is not loaded with fat, cholesterol, growth hormones, pesticides, and politics. Requiring a doctor's prescription to obtain these is almost unbelievable. It's a hurdle that the dairy industry and the USDA know most women will not overcome. When USDA blocks this option and forces women to use cow's milk, who wins and who loses in the long run?

The current quantities of eggs and cheese in the WIC package is horrible. What are we feeding these children? Does this package follow any semblance of science? No. The 2005 Dietary Guidelines for Americans and the recommendations of the Institute of Medicine are as good as we can get right now, so I am in favor of the WIC package moving towards that.

David Herring Nutritionist

Nothing will benefit human health and increase chances for survival of life on Earth as much as the evolution to a vegetarian diet.

-- Albert Einstein

From: Dawn Hofberg [dhofberg@mccinc.org] Sent: Monday, November 06, 2006 1:37 PM

To: WICHQ-SFPD Subject: WIC Changes

These changes are what I have been advocating since the program began! Thanks for making my job easier. Now I don't have to tell pregnant women and nursing mothers to feed half of there subsidized foods to the house pets.

Keep up the good work.

D Hofberg PA Women's Health and Family Practice

From: Walter Humphreys [hum4eees@sbcglobal.net]

Sent: Monday, November 06, 2006 7:49 PM

To: WICHQ-SFPD

Subject: Food Packet for WIC

At last a food packet that encourages the use of fresh fruit and vegetables in participants diets. All are excited for the change. There was way too much juice in the old packet.

Women need to know that they do not need expensive baby food in jars but how to make their own using fresh ingredients. Therefore, I would encourage not including jar baby food in any packet.

Women who take their health seriously use organic products. They are being discriminated against in the WIC arena. Organic milk, eggs and cheese that are hormone free are important to all, WIC should not eliminate these options. Many understand that this option is expensive but would give up some other food items to be allowed to purchase Organic foods.

We are looking forward to a progressive food package that increases the options WIC participants have.

Yours truly,

Lorna Humphreys, IBCLC
"Breastmilk, Brain food of the next generation!"

From: Janelle Jacobs [JanelleJ@ichs.com] Sent: Monday, November 06, 2006 1:09 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Patricia N. Daniels WIC Director, FNS/USDA 3101 Park Center Drive, Room 528 Alexandria, VA 22302

RE: Docket ID Number 0584-AD77

Dear Ms. Daniels:

I am writing to support USDA's proposed new WIC food packages rule because it will improve the health and nutritional quality of the foods offered, expand cultural food options, and increase choices for the women, infants and children in the WIC program.

Since the foods offered in WIC were last revised, there has been an explosion of knowledge related to nutrition and health, as well as a growing obesity problem in this country. The proposed new WIC food packages will strengthen WIC's positive role in helping mothers and children maintain a healthy weight and allowing them to make healthy food choices.

I commend USDA for updating the WIC food packages to reflect the Dietary Guidelines and current nutritional science by adding fruits, vegetables, whole grain bread, corn tortillas, and the option of soymilk and tofu, and moving to low-fat milk and whole grain cereals.

I support USDA for building in protections safeguarding the nutritional value of the new food packages for all participants by strictly prohibiting state level cuts to the new food packages.

To ensure that WIC participants can get the full value from the healthy new WIC food packages, we offer the following recommendations to strengthen the proposed rule:

- a.. Increase the fruit and vegetable benefit by \$2 to fully meet the recommendations of the Institute of Medicine for women and children in WIC.
- a.. Allow WIC participants to choose the kinds of fruits and vegetables they want.
- a.. Allow WIC participants to choose healthy and culturally appropriate cereal by revising the proposed cereal standard to include whole grain corn-based (i.e. corn flakes), rice (i.e. puffed rice) and bran (i.e. bran flakes) WIC cereals.

- a.. Remove the requirement for children to have a prescription to obtain soy milk from WIC.
- a.. Maximize access to Farmers' Markets and the WIC Farmers' Market Nutrition Program for local seasonal fruits and vegetables.
- a.. Establish WIC state advisory councils of stakeholders to help support and inform the planning and implementation of the new food package.

Thank you for this opportunity to share my support for the healthy WIC food packages and my recommendations to make them stronger still. I hope USDA will act quickly to issue the new food packages.

Sincerely,

Janelle Jacobs, RN, BSN
Clinic Manager - ID Clinic
ICHS
720 8th Avenue South, Suite 100
Seattle, WA 98104
206-788-3717
Fax 206-788-3704
mailto:janellej@ichs.com
www.ichs.com

From: Karen Kipp [kkipp@lakeviewcares.com] Sent: Monday, November 06, 2006 4:00 PM

To: WICHQ-SFPD

Subject: docket id#0584-ad77,WIC food package rule

To whom it may concern,

As a Registered Dietitian fworking or a community hospital and former WIC nutritiontist, I strongly urge you to consider adding fruits, veggies, whole grain and soy products to your food package. With childhod obesity, heart disease and type 2 diabetes on the rise this would help prevent these problems in this age group. Also many ethnic groups are allergic to milk and need a soy beverage replacement.

Thank you,

Karen Kipp MA, RD Lakeview Community Hospital Paw Paw, MI,49079

Sent: Monday, November 06, 2006 3:13 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Pamela Koch EMAIL: pkoch@tc.edu

CITY: New York

STATE: NY

ORGANIZATION: Teachers College Columbia University

CATEGORY: Other

OtherCategory: University Professor and Child Nutrition Educator

Date: November 06, 2006 Time: 03:13:22 PM

COMMENTS:

TEACHERS COLLEGE COLUMBIA UNIVERSITY PROGRAM IN NUTRIITON LINKING FOOD AND THE ENVIRONMENT (LIFE)

November 6, 2006

Patricia N. Daniels
Director
Supplemental Food Programs Division
Food and Nutrition Service, U.S. Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, VA 22302

RE: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear Ms. Daniels:

I am a Registered Dietician working with the New York City Head Start community as a nutrition consultant, and while I am not offering comment on behalf of these organizations I am an active member of the American Dietetic Association, Society for Nutrition Education, Community Food Security Coalition, New York City Nutrition Education Network and New York City Food Systems Network. I support USDA's proposed new WIC food packages rule because it will:

- improve the health and nutritional quality of the foods offered
- provide incentives for breastfeeding
- expand cultural food options

- ____incorporate-whole-grains and more fruits and vegetables while reducing juice ____
- provide more variety
- increase healthful choices for the women, infants and children in the WIC program
- bring the choices in line with the current Dietary Guidelines for Americans and the current infant feeding practice guidelines of the American Academy of Pediatrics (this is important to health and nutrition education)
- restrict added sugars, starches, or salt in infant food
- reduce fat content especially saturated fat.

Food and nutrition knowledge along with the diseases that impact young and old have changed substantially since the WIC foods have been revised over 25 years ago. We have also experienced a growing obesity problem in this country that is calling every sector of our country to action. The proposed new WIC food packages will strengthen WIC's positive role in helping mothers and children maintain a healthy weight and allowing them to make healthy food choices for life long health.

I encourage the following recommendations to strengthen the proposed rule be considered, to ensure that WIC participants can get the full value from the healthy new WIC food packages:

- Increase the fruit and vegetable benefit by \$2 to fully meet the recommendations of the Institute of Medicine for women and children in WIC
- Require small vendors to provide more than just two varieties each of fruits and vegetables. Each vendor should be required to carry a wide selection of fruits and vegetables. The addition of fruits and vegetables to the WIC Food Packages has the potential to increase participants' access to fruits and vegetables
- Allow WIC participants to choose the kinds of fruits and vegetables they want.
- Require that all milk in the food packages for children ages 2 to 4 years (some recipients of Food Package IV) and women (Food Packages V, VI, and VII) be low fat (1%) or fat-free (skim).
- Require all cheese offered in the food packages to be light, reduced, or low in fat to be consistent with the recommendation in the Dietary Guidelines to select milk products that are low fat or fat free
- Remove the requirement for children to have a prescription to obtain soymilk from WIC.
- Establish an alternative minimum nutrient standard for soy beverages.

- USDA replace its proposed definition of whole grains and replace it with one-based on the definition from the HealthierUS School Challenge. Whole grain WIC cereals and bread meet one of the following standards:
- The product must be whole grain according to a Standard of Identity;
- The ingredient statement on the label must list a whole grain as the first ingredient;
- Where the first listed ingredient is not identified clearly as a whole grain (for example, the first ingredient is "corn"), documentation much be obtained from the manufacturer that the first listed grain ingredient is whole grain;
- If the first listed ingredient is not whole grain, the product can be considered whole grain if the other whole grain ingredients, including bran, together comprise at least 51% of the weight of the product; for such products, documentation must be obtained from the manufacturer; or

If the label carries the whole grain health claim ("diets rich in whole grain foods and other plant foods and low in total fat, saturated fat, and cholesterol may help reduce the risk of heart disease and certain cancers") on its product label, no further documentation is required

- Allow tortillas that are low in saturated fat and contain less than 0.5 g trans fat per serving. The existing recommendation is too restrictive.
- Incorporate low-sodium standard into canned product available, being defined using the standard FDA definition of 140 mg or less per reference amount to provide further consistency with the Dietary Guidelines for Americans. This would also drive availability of these products into low-income communities, which are often at the greatest risk of hypertension.
- Protect the WIC FMNP from reduction in current funding levels or the establishment of rules, systems, or procedures at the federal or state levels that would adversely affect the operation and effectiveness of the WIC FMNP.
- Require coordination between the proposed WIC fruit and vegetable voucher program and all existing and future federal-state WIC FMNP.
- Specify that farmers and farmers' markets that are currently authorized under state WIC FMNP procedures be automatically eligible for vendor specification under the new fruit and vegetable voucher program. These WIC FMNP farmer and farmers' market authorization procedures should also be applied by states in the future vendor specification process.
- Allow farmers and farmers' markets to participate as seasonal vendors, since mostfarmers' markets in the country are unable to operate year round. Similarly, farmers' markets need to be exempted from the "WIC only" cost containment requirement and not be required to carry a full range of WIC food package products.

- Provide EBT-and-or-voucher systems that have practical applications for farmersand farmers' market vendors.
- Require that the value of the fruit and vegetable benefit regularly receive cost of living adjustments (COLA). The cost of living adjustment should not be optional as proposed. Without an annual cost of living adjustment, the fruit and vegetable vouchers will continually decrease in value as inflation increases. As a result, the vouchers will buy smaller amounts of fruit and vegetables over time, resulting in participants receiving fewer fruits and vegetables than recommended by IOM.
- Steps be taken to work with State and local WIC agencies and authorized retailers to facilitate clients' use of cash-value vouchers for fruits and vegetables, as recommended by IOM. This may include the following strategies:
- Ensure that adequate signage and tools (e.g. accurate, consumer-friendly scales) are available at retail outlets, for WIC clients to estimate the cost of their fruit and vegetable purchases before proceeding to checkout and readily identify those items located in the produce department that do not qualify.
- Display fruits and vegetables so that costs are easily understood.
- To ensure that systems are in place to allow a client to pay for any excess costs for fruits and vegetables, should the total cost of produce at checkout exceed the value of the vouchers presented, thereby minimizing stigma and maximizing efficiency.
- Establish WIC state advisory councils of stakeholders to help support and inform the planning and implementation of the new food package

Thank you for this opportunity to share my support for the healthy WIC food packages and my recommendations to make them stronger still. I hope USDA will act quickly to issue the new food packages to bring these improvements to WIC participants as soon as possible.

Sincerely,

Pamela A. Koch, EdD, RD Adjunct Assistant Professor for Nutrition Education Project Director, LiFE (Linking Food and the Environment)

Email: pkoch@tc.edu Phone: 212/678-3001/3480 525 West 120th Street, Box 137

New York, NY 10027

From: leanders@slu.edu on behalf of leanders [leanders@slu.edu]

Sent: Monday, November 06, 2006 10:50 AM

To: WICHQ-SFPD

Subject: WIC rood packages support

Patricia N. Daniels
Director
Supplemental Food Programs Division
Food and Nutrition Service, U.S. Department of Agriculture
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Dear Ms. Daniels:

As a faculty member teaching our future nurses, I support the WIC Food Packages Proposed Rule and the U.S. Department of Agriculture's (USDA) efforts to better align the food packages with the Dietary Guidelines for Americans. My students are frequently in touch with recipients of the WIC program. the students are regularly surprised at how much the recipients rely on the program for nutritional support.

The college students usually come from a very different socio-economic group than the WIC recipients. Please consider the following suggestions to further strengthen the final rule.

-- The USDA should provide the full fruit and vegetable benefit recommended by the Institute of Medicine. Also, I recommend that the final rule require that the value of the fruit and vegetable benefit regularly receive cost of living adjustments (COLA).

In addition, I recommend limiting sodium in canned or frozen vegetables to no more than 480 mg per serving (the disqualifying level for the Food and Drug Administration's [FDA] "healthy" claim). And I strongly support the proposed rule on the elimination of fruit juice for infants and decreases in the quantity of juice for children and women in the food packages.

- -- I support the promotion of whole grains in the revised food packages. Also, I support retaining the proposed limit on sugars in WIC cereals.
- -- Bringing the quantity of milk in the WIC food packages in line with the Dietary Guidelines is another important recommendation in the proposed rule. However, I recommend that USDA require that all milk in the food packages for children ages 2 to 4 years and women be low-fat (1%) or fat-free (skim), to reflect the recommendations in the Dietary Guidelines and to help to reduce saturated fat intake and the risk of heart disease. I support the

proposed-rule regarding-allowing-soy-based beverages and calcium-set tofu as substitutes for milk in Food Package IV, VI, and VII.

- -- I strongly support the proposed rule regarding reducing the quantities of cheese and eggs in the food packages to help decrease saturated fat and cholesterol intake. To further help WIC participants limit their saturated fat intake, I urge USDA to require all cheese offered in the food packages to be light, reduced, or low in fat to be consistent with the recommendation in the Dietary Guidelines to select milk products that are low fat or fat free.
- -- I strongly support USDA's proposed revisions to the WIC food packages to provide greater incentive for breastfeeding. Also, I support the proposed rule's inclusion of a greater variety of options throughout the food packages to promote greater acceptability of WIC foods by participants.

Overall, I strongly support USDA's proposed rule for updating the WIC food packages. I urge USDA to publish the final rule promptly, by spring 2007 at the latest, to bring these improvements to WIC participants as soon as possible.

Sincerely,

Sheila A. Leander, RN, MSN Assistant Professor Saint Louis University Doisy College of Health Sciences School of Nursing 3525 Caroline Mall #425 St. Louis, MO 63104 314-977-8984 From: Lee Lichtenwalter, MPH, RD, LDN [llichtenwalter@ph.co.durham.nc.us]

Sent: Monday, November 06, 2006 6:31 PM

To: WICHO-SFPD

Subject: ?Docket ID Number 0584-AD77, WIC Food Packages Rule,?

Patricia N. Daniels
Director, Supplemental Food Programs Division Food and Nutrition Service USDA
3101 Park Center Drive
Room 528
Alexandria, VA 22302

"Docket ID Number 0584-AD77, WIC Food Packages Rule,"

Dear Ms. Daniels:

The WIC program has been responsible for providing the calories and nutrients needed for the first year of life for hundeds of children with whom I have worked directly.

I am writing to thank USDA/FNS for its efforts in bringing the WIC food packages in alignment with the 2005 US Dietary Guidelines and other national nutrition guidance, including those of the American Academy of Pediatrics.

I have worked with young chikldren and pregnant women forw 20 years and have seen the benefits of their participation in the WIC program. Through the years I have also longed for many of the revisions that are proposed. First, eliminating juoce for infants and reducing the volume for children will reinforce the message that we are giving their parents. Consumption of juice works against boith underweight and overweight children, and it is unnecessary for infants. Juice is a contributer to excess calories that can lead toi childhood obesity. Juice is also a sweet and easy to consume food that displaces nutrient dense and higher calore foods that some many of the chikdren I work with need to gain adequate weight.

The proposed changes add fruits and vegetables, whole grain cereals and other whole grains, soy milk, tofu and canned beans, among others, which provide a greater variety of high nutrient food choices to the WIC participants. These additions will allow WIC to better meet the needs of its culturally diverse population.

The revised food packages will help our nation's families to establish healthy eating habits – a key to preventing obesity, diabetes and heart disease.

I support the NWA positions on the USDA proposal to revise the WIC food package. I also support the additional revisions to the proposals that the NWA has made. I urge USDA to finalize the rule with revisions as suggested by NWA as soon as possible.

Lee Lichtenwalter, MPH, RD, LDN 414 E Main Street Durham, NC 27701 From: Michelle Londono [michelle@proactiveway.com]

Sent: Monday, November 06, 2006 3:04 PM

To: WICHQ-SFPD

Subject: 0584-AD77, WIC Food Packages Rule

Dear USDA

I am thrilled to see the proposed changes in the WIC supplemental foods. Espcially for the breastfeeding mother. When a mother eats healthy, so will her children. A breastfed child, who then learns also to eat healthy will greatly reduce our increasing child obesity in this country.

It is great to see finally tofu and soy milk as a choice. It's a great lean, protein alternative. I agree with all the changes. Just wish other nut butters were also available for those that are allergic to peanuts.

Good job,

Michelle Londoño, RN, PHN, IBCLC, mother of two little healthy girls

From: yvetter mccullen [tydau1@yahoo.com] Sent: Monday, November 06, 2006 9:59 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77. Wic Food Packages Rule

Breastfeeding: I support the stronger incentives for continued breastfeeding by providing less formula to partially breastfeed infants and providing additional quantities/types of food for breastfeeding mothers. These changes will promote and support long term successful breastfeeding, which is a key early step in obesity prevention. These proposed changes will help bring the WIC program in line with the lastest scientific findings. Thank you for the opportunity to comment.

Sincerely:

Teresa McCullen IBCLC, RLC MCGHI-Women's Health 1120 15th Street Augusta, GA 30907 From: geocmerz@juno.com

Sent: Monday, November 06, 2006 4:49 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77

Good afternoon -

I am writing to support of the USDA\'s proposed rule and encouraging USDA to strengthen its proposal by including the full benefit recommended by the Institute of Medicine for fruits and vegetables, whole grains and soy products. Thank you.

George C. Merz, RD, LDN

From: Morse, Meghan [MMORSE5@PARTNERS.ORG]

Sent: Monday, November 06, 2006 4:02 PM

To: WICHQ-SFPD

Subject: Docket ID# 0584-AD77, WIC Food Packages Rule

Hello,

I am writing in support of the proposed changes to the WIC packages. I am a provider in Massachusetts and know that my participants would greatly benefit from this change.

Thank you,

Meghan Morse, R.D., L.D.N.

From: Laura Nance [nancel@musc.edu] Sent: Monday, November 06, 2006 10:10 AM

To: WICHQ-SFPD

Subject: I am a registered dietitian and certified diabetes educator; I

was a WIC nutritionist for 3 years.

I am a registered dietitian and certified diabetes educator; I was a WIC nutritionist for 3 years. I am strongly encouraging WIC packages to include fruits, vegetables, whole grains, and soy products as recommended by the Institute of Medicine.

Laura Marie Nance MA, RD, CDE Clinical Dietitian

From: jill@theveggiequeen.com

Sent: Monday, November 06, 2006 12:57 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

As a Registered Dietitian (and former WIC employee), I support the proposed rule and encourage you to strengthen your proposal by including the full benefit of foods recommended by the Institute of Medicine for fruits and vegetables, whole grains and soy products. Mothers, infants and children need the highest and best nutritional input that is available to and for them.

Thank you,
Jill Nussinow, MS, RD
The Veggie Queen
www.theveggiequeen.com

From: Paige, Florrie [fpaige@deerfield.edu] Sent: Monday, November 06, 2006 12:36 PM

To: WICHQ-WEB

Subject: "Docket ID Number 0584-AD77, WIC Food Packages Rule,\"

Please take advantage of the opportunity to strengthen the proposal by including the full benefit recommended by the Institute of Medicine for fruits and vegetables, whole grains and soy products. WIC is a hands on Nutrition Education tool that has been under utilized and too often is unable to follow through with the healthy eating recommendations it makes when the time comes to include the food.

Florrie Paige, MS, RD, LDN Director of Food Service Deerfield Academy Deerfield, MA 01342 From: Parham, Myriam [Myriam.Parham@ahss.org]

Sent: Monday, November 06, 2006 12:32 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

Dear USDA,

This is in reference to the proposed update to the WIC food packages. As a former WIC nutritionist, with almost 7 years of experience in this area, I would like to offer the following comments:

I wholeheartedly support the proposed rule (Docket ID Number 0584-AD77, WIC Food Packages Rule), which is based on the April 2005 published recommendations by the Institute of Medicine. This rule, if approved, will introduce new foods such as; fruits, vegetables, whole grains and soy products to the WIC food packages. I am particularly pleased to see the inclusion of soy products, such as soy beverages and tofu as alternate sources of protein and dairy, the addition of vegetables, the decrease of juices and the addition of fruit. These very important changes will help address the cultural needs and preferences of the increasingly diverse WIC population. All participants will benefit from the inclusion of the healthier foods and participants with lactose intolerances or preferences for vegetarian diets will now have viable options.

These changes, the first major changes in the food packages in more than 30 years, will help improve the utilization of the foods and the overall health of the WIC families. These important changes may help to reduce obesity and other diet-related chronic diseases.

Thank you for your kind attention to this very important proposal.

Respectfully submitted by,

Myriam Parham, RD, LD, CDE Clinical Dietitian, Diabetes Educator Florida Hospital Zephyrhills 7050 Gall Blvd. Zephyrhills, FL 33541

Phone: (813) 788-0411 Ext. 1331

Fax: (813) 715-6697

From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 10:19 AM

To: WICHO-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Sherry Parmenter

EMAIL: sherryp@fmchealth.org

CITY: Lancaster STATE: Ohio ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 10:19:12 AM

COMMENTS:

Yes, please support the proposed rule! Individuals need to be able to obtain a greater variety of healthy foods such as fruits and vegetables. Eating habits are established early and we need to start off all children towards a healthy lifestyle.

From: Annette Pederson [panda83@charter.net] Sent: Monday, November 06, 2006 10:36 AM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule,

I have some concerns listed below regarding WIC food packages:

I support recommenation for changes with Food Package 2-decreasing infant cereal provided, adding commercial infant fruits and vegetables, fresh bananas

Please include fruits and vegetables that are fresh, frozen, and canned, I oppose white potatoes being excluded
Please include Farmers Market as source of fruits and vegetables,
Consider yogurt as a milk /calcium substitute
Please define min. nutrient standards for soy milk

Thanks,

Annette Pederson, MS, RD, CD LifeCare Solutions 11703 E. Sprague Ave. Ste C-3 Spokane Valley, WA 99206 Phone ~ 509 921-6560 Fax ~ 509 921-6551 From: Piette [piette@comcast.net]

Sent: Monday, November 06, 2006 3:00 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77

As a community-based nutritionist who has worked with young children and their parents for over twenty-five years and a tax-payer, I urge you to adopt the proposed changes to the WIC program food packages. It is critical that government policies support good health practices, especially for infants and young children.

Linda D. Piette, RD, MS

From: janschilli@aol.com

Sent: Monday, November 06, 2006 4:33 PM

To: WICHQ-SFPD

Cc: Delsimone@webtv.net; lani@hermanns.org; tonyl@rubiconprograms.org;

mlfujii@yahoo.com

Subject: WIC and Farmer's Market

Congratulations WIC on adding fruit and vegetables to food vouchers for WIC Participants. I heartily support his addition--but have one question. Will WIC participants continue to buy fruit and vegetables at Farmer's Markets? Our Richmond Farmer's Market serves many WIC participants today and the small farmers in our area profit greatly from their purchases. With new food vouchers will most WIC participants purchase fruit and vegetables from grocers--who purchase from large corporate farms--leaving little of that business for the small farmer at our Farmer's Markets? I hope the 46 states who have made fruit and vegetables available to WIC participants these past several years will see increased sales, and not fewer from WIC participants. Please require that some vouchers be issued for use only at farmer's markets and not at WIC eligible grocers. We want our small farmers to continue to thrive and grow.

Jan Schilling, RD, MS, MPH Weigh of Life 2369 Barrett Ave. Richmond, CA 94804 510-323-3052 From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 7:57 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Sarah Ann Schwen MD

EMAIL:

sarahannschwen@yahoo.com

CITY:

Indianapolis

STATE:

 \mathbb{N}

ORGANIZATION: St Vincent Family Medicine Residency

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

07:57:23 PM

COMMENTS:

Sarah Ann Schwen MD 567 W 72 Street Indianapolis IN, 46260 sarahannschwen@yahoo.com 26 September 2006

Ms Patricia N. Daniels Director Supplemental Food Programs Division USDA Food and Nutrition Service 3101 Park Center Drive, Room 528 Alexandria, Virginia 22302

Dear Ms Daniels,

Thank you for inviting comments on the proposed WIC Food Packages Rule Docket ID Number 0584-AD77.

As a resident in Family Medicine serving a diverse population of patients in central Indiana, many of whom are WIC recipients, I was delighted to read the Institute of Medicines sound recommendations in their independent review of the WIC program, and to see most of their recommendations included in the proposed rule.

I firmly support the proposed removal of juice from the packages for recipients under one and the decreased amount of juice for children ages 1-4, which is much more in line with the guidelines of the American Academy of Pediatrics and with dietary teaching I provide to parents during well child visits. More than one small glass of juice per day can contribute to obesity and also supplants whole fruits and vegetable in the diet. It has been an uphill battle trying to convince parents of obese children to allow their children less

juice than they can obtain through WIC. The proposed new limits on eggs and cheese are also nutritionally sound, and to be applauded.

The proposed addition of fruits and vegetables is also a welcome change, in keeping with the 2005 Dietary Guidelines for Americans, which will have wonderful health benefits for program recipients. Fresh is best nutritionally, therefore, I would encourage you to continue the farmers market program, in addition to the newly proposed fruit and vegetable coupons. I would also urge you to if possible include the full amount of fruits and vegetables suggested by the Institute of Medicine rather than the lesser amount proposed in an attempt to obtain budget neutrality. Infant and child nutrition from the beginning of life will more than pay for itself in saving on health care cost down the road. It would be shortsighted to insist on budget neutrality since infant nutrition provides a foundation for a lifetime of good health. Because fresh produce highly perishable and not available in all settings, I understand the need to allow for substitution of canned fruits and vegetables. I would propose allowing only fruit packed in fruit juice and or water, not in high fructose corn syrup or other sweeteners.

Limiting breads to whole grains is also very sound nutritionally. I applaud this proposal. I hope the individual state programs will take advantage of the opportunity to offer whole grains that are culturally appropriate such as whole wheat, or corn tortillas.

I am glad to see that allowance for substitution of calcium fortified, soy-based milk substitutes is proposed for older children and adults, and that calcium enriched tofu will be allowed as well. I do not feel that it is helpful to require that clients get a prescription from their doctor for these substitutions since religious beliefs, and vegan diet, in addition to health related concerns such as allergy or lactose intolerance may cause clients to seek these nutritious alternatives, and the substitutions are not likely to adversely affect the health of any clients. I do concur with the requirement of a doctor's prescription for formula substitutions in infants.

Thank you in advance for your consideration of my input.

Very sincerely,

Sarah Ann Schwen MD Resident, Family Medicine St Vincent FM Residency Program 8220 Naab Road Indianapolis IN 46260 From: Guzman, Maria [Maria.Guzman@dshs.state.tx.us]

Sent: Monday, November 06, 2006 4:39 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

The Texas Fruit and Vegetable Network (TFVN) is a partnership of organizations and groups working to bring together the produce industry, retailers, health promoters/educators, researchers, food service, and food assistance programs to promote fruit and vegetable consumption among Texans.

We strongly support the WIC Food Packages Proposed Rule calling for the addition of fruits and vegetables to the WIC food packages. We commend the Food and Nutrition Service — and the leadership and efforts of FNS' SNP, the WIC division, and OANE, for proposing these important changes to the packages, aligning them with the 2005 Dietary Guidelines, and meeting the public health challenge of chronic disease prevention.

As you proceed through the rulemaking process, we respectfully submit the following recommendations for your consideration:

- 1. On the Fruit and Vegetable purchase voucher and Cash Allocation Strategy: We fully support that all fruits and vegetables fresh, canned, dried, and frozen qualify for purchase using the cash-value fruit and vegetable voucher, and that efforts be made to increase the voucher amounts to \$10 for WIC mothers and \$8 for WIC children when and if practicable.
- 2. We ask that FNS consider expansion of the Cash Allocation Strategy beyond farmers' markets and traditional purchase sites to produce and grocery vendors that are specific to the WIC customer. This could prove a viable niche in the market for smaller grocery vendors to not only establish their customer base, but also allow for tailoring of both grocery and produce items consistent with the health needs to the WIC population. Other non-traditional sites to consider would be roadside or field-specific vendor groups, or even produce-specific vendor or vendor groups, as in areas that boast a special crop (e.g. the citrus crop of the border area of the Rio Grande Valley in Southernmost Texas).
- 3. On infants being allowed commercial fruit and vegetables, the substituting of bananas for baby food, and juice limitations: Despite recent news from other state(s) calling for USDA to drop juices entirely from the packages, TFVN believes complete elimination is too restrictive, and not conducive to government-vendor relations.
- 4. On increasing fiber: The rule should list fruits and vegetables as a primary fiber source. The rule should also list legumes, beans and peas selections. We support both the inclusion and specifying of whole wheat breads and other whole grain products. Finally, the reality of the disparity present in WIC clients in regards to nutrition knowledge and application warrants inclusion of an education component in addition to inclusion of

these or any 'new' foods. This is because inclusion of "new foods" in the packages does not necessarily equate to their consumption. This educational component should promote client efforts in regards to adequate fiber intake that stresses selection of a variety of dietary fiber sources, both soluble and insoluble, that includes whole grain bread/products, fruits and vegetables, and legumes.

5. Regarding sweetened baby foods and fruits and vegetables with added sodium and sugar: We strongly support the rule in regards to its current language on this subject.

Again, we commend USDA/FNS for developing the proposed rule to more accurately reflect current dietary recommendations, especially in allowing for increased fruit and vegetable consumption for WIC families, and we urge FNS to expedite the process as much as possible so that the final rule would be published in the Federal Register by the fall of 2007.

Texas Fruit and Vegetable Network Public Policy Workgroup

Peter S. Murano, PhD

External Chair of the Public Policy Workgroup for the Texas Fruit and Vegetable Network, Associate Professor for Nutrition and Food Science and Director of the Center for Obesity Research and Program Evaluation (CORPE) at Texas A&M University

From: Vodicka, Pamella (HRSA) [PVodicka@hrsa.gov]

Sent: Monday, November 06, 2006 4:03 PM

To: WICHQ-SFPD

Subject: Docket ID Number 0584-AD77, WIC Food Packages Rule

To whom this concerns,

Please note that while I am sending this response from my work station, I am speaking on behalf of my knowledge as a pediatric dietitian.

First, I wish to say that I truly appreciate the time and intent in all changes made to the WIC package. And, yet, I foresee the need for one slight revision...a more aggressive move than you have already acted on. My concern is in regards to the continued use of fruit juice for all ages.

While you have decided to eliminate fruit juice in the 6 to 11.9 month old group and reduce the juice allowance in all older children and adult women...both acceptable changes...I beg that you reconsider the later change and consider eliminating juice altogether.

The basis for this suggestion lies in the documents which I suspect have already been referenced...the Committee on Nutrition Report, American Academy of Pediatrics: the use and misuse of fruit juice in pediatrics (Pediatrics 2001; 107:1210-3). In this report it is not only acknowledged that fruit juice offers no nutritional benefit for infants younger than 6 months...but also fruit juice offers no nutritional benefits over whole fruit for infants older than 6 months and children. (May I suggest the same for adult women of child-bearing age?) In this report it is also noted that the AAP and the American Academy of Pedodontics recommendations state that juice should be offered to infants in a cup, not a bottle, and that infants not be put to bed with a bottle in their mouth. They also recognize that excess exposure of the teeth to carbohydrate, promotes development of dental caries.

As for oral health, I wish to believe it was an oversight in the documentation...having noticed that oral health (as a component of overall health) is not mentioned in the review of why changes were made in the WIC package. While I fully agree that the reduction of juice removes excess calories that could contribute to the development of obesity, I suggest the need to stress the importance of minimizing excess exposure of all sugars to the teeth.

Again, I return to the fact that it is well documented and a supported fact that juice provides NO additional nutritional benefit over whole fruit. Supporting my recommendation of including oral health as an issue for the changes made to the WIC package, please note the document by Bader and colleagues, A summary of the evidence for the U.S. Preventive Services Task Force (American Journal of Preventive Medicine

2004; 26 (3): 315-25). In this summary, the issues of oral health in children revolve principally around dental caries. It is noted that in the United States, dental caries is the most common chronic childhood disease, and its treatment is the most prevalent unmet need. Also noted is the fact that dental caries is unequally distributed among the population, with caries incidence, prevalence, and severity being greater among minority and economically disadvantaged children than among other groups.

White it is true that the allowance of juice intake does not exceed that recommended by various national organizations (no more than 4 to 6 fluid ounces per day), I feel compelled to recommend that it be eliminated, especially for all children, in light of the existing risk of dental caries in this population. While recommending to a caregiver that juice be provided only in a cup could conceivably be considered intervention, it is not an acceptable alternative to prevention. Eliminating the impact of juice on the oral health of a child would indeed be achieved by eliminating juice from the WIC package. Balancing this with the fact that it is well documented that there is no additional nutrition benefit for the inclusion of juice, supports this revision.

And yet exceptions may be the intent of continuing to provide juice. If there is a compelling need to continue juice, I strongly recommend that you make it an exception. For instance, I can fully understand that a child with special needs, who may be unable to chew adequately to consume solids, could benefit from fruit juice, especially if they are in need of additional calories.

With that said ...be it whether or not you consider the recommendation to further revise the package and eliminate fruit juice from the WIC program...I do hope you see a need to include the positive impact of the proposed changes of the WIC package on oral health.

Regards,

Pamella Vodicka, MS, RD CDR 702617

From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 12:29 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME:

Tatjana Walker

EMAIL:

tatjana@wordwright.com

CITY:

San Antonio

STATE:

TX

ORGANIZATION:

CATEGORY:

IndividualHlthProfessional

OtherCategory:

Date:

November 06, 2006

Time:

12:29:11 PM

COMMENTS:

Breastfeeding: I support the stronger incentives for continued breastfeeding by providing less formula to partially breastfed infants and providing additional quantities/types of food for breastfeeding mothers and infants. These changes will promote and support long term successful breastfeeding, which is a key early step in obesity prevention.

Tatjana Walker, RD, CDE

Support for proposed changes in the WIC package to offer vouchers for fruits and vegetables, whole grains, and soy milkFrom: Wolff, Cindy [CWolff@csuchico.edu] Sent: Monday, November 06, 2006 4:17 PM

To: WICHQ-SFPD

Subject: Support for proposed changes in the WIC package to offer vouchers for fruits and vegetables, whole grains, and soy milk

I am writing to offer my support for Docket ID 0584-AD77, the proposed changes to offer vouchers for fruits and vegetables, whole grains, and soy milk as part of the WIC package.

This change is overdue and will help to improve health outcomes for WIC participants as well as increase

sales of important health promoting agricultural products.

Sincerely,
Cindy Wolff, PhD, MPA, RD
Professor, Nutrition and Food Sciences Program
Director, Center for Nutrition & Activity Promotion
California State University, Chico
cwolff@csuchico.edu
530 898-5288

From: WebMaster@fns.usda.gov

Sent: Monday, November 06, 2006 4:19 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: Megan Woodcock

EMAIL: megan.woodcock@maine.gov

CITY: Augusta STATE: Maine ORGANIZATION:

CATEGORY: IndividualHlthProfessional

OtherCategory:

Date: November 06, 2006

Time: 04:18:31 PM

COMMENTS:

I support the proposed rule and think it would benefit the people we serve a great deal! I have been anticipating a rule such as this to be added and am pleased to see that it is now possible to include it in the WIC program. Thanks.

From: Donna Chamberlain [dlchamb@pacbell.net] Sent: Tuesday, November 07, 2006 1:33 AM

To: WICHQ-SFPD

Subject: Comments on WIC Food

[DATE]

Ms. Patricia N. Daniels, Director Supplemental Food Programs Division Food and Nutrition Services U.S. Department of Agriculture 3101 Park Center Drive, Room 528 Alexandria, Virginia 22302

RE: Comments on WIC Food Packages Proposed Rule, Docket ID Number 0584-AD77.

Dear Ms. Daniels,

Health of individuals, mothers, fathers or children depends a lot upon attitude of nurturing or being nurtured, emotionally as well has physically with the best possible foods that our current Dietary Guidelines have offered. We support the changes in WIC monetary food allowance for vegetables and fruits.

Any steps to encourage breast feeding and a longer period of breast feeding is recommended by most birthing/health providers. Mother's eating habits are the substance of her health and her baby's. Research shows that breast feeding alleviates later obesity. May these new food proposals help mothers make better food choices for her family's health and consequently, happiness. A wise investment into our society's wellbeing.

Sincerely,

Donna Chamberlain, Coordinator for Birth and Early Parenting Educators, Grass Valley and Nevada City., CA

From: M. Donohue/ S. Hinze [donohinz@msn.com] Sent: Tuesday, November 07, 2006 12:54 AM

To: WICHQ-SFPD

Subject: Docket ID 0584-AD77-WIC Food Packages Rule Comments

As a Registered Dietitian who has worked in Public Health for 20 years, I would like to express my support for the proposed changes to the WIC food package. The food package should more closely relate to the recommendations for good nutrition. The recommendations are to consume more whole grains and fruits and vegetables (the base of the pyramid) and to consume less fat and milk (the foods at the top of the pyramid).

USDA needs to support the recommendations for how people should eat by providing foods that meet these criteria.

Many of the major causes of morbidity and mortality result from poor diets that provide too few whole grains, fruits and vegetables. All nutrition programs need to support better diets by promoting more whole grains, fruits and vegetables.

Thank You

Margaret A Donohue R.D., MPH 1371 Edgcumbe Road St. Paul, MN 55116 From: lydia tinajero [dra.tinajero@sbcglobal.net] Sent: Tuesday, November 07, 2006 1:50 AM

To: WICHQ-SFPD

Subject: Docket 1D#0584-AD77 WIC FOOD PACKAGES RULE

To whom it may concern,

I'm a pediatrician and the co-director of the weight management clinic called HEAL at Children's Hospital and Research Center Oakland, California. I support the new package changes and believe that these are great steps as we work towards fighting the obesity epidemic.

I would ideally like to see no juice and more resources for fresh fruit and vegetables, but again these are first steps and appreciate the great effort that has been put into effect with these changes.

Thanks, Lydia Tinajero-Deck, M.D. Children's Hospital and Research Center, Oakland 747 52nd St. Oakland, CA 94609 PI-138 HP 854

From: WebMaster@fns.usda.gov

Sent: Monday, October 23, 2006 3:08 PM

To: WICHQ-SFPD

Subject: RevisionstoWICFoodPackages-Proposed Rule

NAME: David Luehr, M.D., past president, Minnesota Medical Association

EMAIL: davidluehr@yahoo.com

CITY: Cloquet STATE: Minnesota

ORGANIZATION: Minnesota Medical Association CATEGORY: PublicInterest-AdvocacyGroup

OtherCategory:

Date: October 23, 2006 Time: 03:08:23 PM

COMMENTS:

August 14, 2006

Patricia N. Daniels
Director, Supplemental Food Programs Division Food and Nutrition Service - USDA
3101 Park Center Drive, Room 528
Alexandria, VA 22302

Dear Ms. Daniels:

The Minnesota Medical Association, a professional organization representing about 10,000 physicians, urges that fruit juice be eliminated from the list of eligible foods in the WIC supplemental nutrition program for women, infants and children and that fruit and vegetables be added.

It is important for federal programs to adopt policies that will help reduce obesity especially in children. The percentage of children aged 6 to 11 who are overweight has more than doubled in the past 20 years and obesity puts children at increased risk for developing high blood pressure, high cholesterol, and type 2 diabetes as well as bone and joint problems, shortness of breath, sleep apnea and depression.

Currently, any adult or infant fruit and/or vegetable juice or juice blends (e.g., orange, grapefruit, apple, grape, pineapple, tomato, cran-apple) are WIC-eligible. Fruits are not WIC-eligible.

The only vegetables that are WIC-eligible are "mature dry beans or peas (e.g., lentils, black, navy, kidney, garbanzo, soy, pinto, and mung beans; Crowder, cow, split and black-eyed peas)" and fresh, raw or frozen carrots.

MMA physicians believe that the WIC program should encourage families to eat fruits and vegetables every day and to limit their consumption of fruit juice in order to prevent obesity.

Almost 80 percent of young people do not eat the recommended number of servings of fruits and vegetables, according to the Centers for Disease Control.

The Institute of Medicine's final report on WIC food packages "Time for a Change," calls for a significant improvement. The IOM's recommended revised food package for young children would match current recommendations from the American Association of Pediatrics. Juice would be limited to about 4 oz. a day

and a cash value voucher would allow the purchase of whole fruits and vegetables.

The MMA strongly supports this change but urges the Dept. of Agriculture to go even further and entirely eliminate juice from the list of WIC-eligible foods.

MMA physicians believe that the consumption of fruit juice contributes to obesity in children. Fruit juice tastes good and can easily be sipped throughout the day, adding to calorie consumption. According to the American Academy of Pediatrics, fruit juice offers no nutritional advantage over whole fruit and lacks the fiber of whole fruit. Kilocalorie for kilocalorie, fruit juice can be consumed more quickly than whole fruit.

The MMA urges the Dept. of Agriculture to take this important step to reduce obesity in children.

Sincerely,

David Luehr, M.D. President Minnesota Medical Association